



COUNTY BOROUGH OF DERBY



# ANNUAL REPORTS

OF THE

Medical Officer of Health

AND

Principal School Medical Officer

FOR THE

*Year, 1955*

BY

V. N. LEYSHON, M.D. (LOND.), D.P.H.



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## **HEALTH COMMITTEE.**

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18 members (including the Chairman and Deputy Chairman).

**Functions :—**

General Administration.

Ambulance Service.

To receive minutes of the Sanitary Sub-Committee and to confirm minutes of the Health Services Sub-Committee.

### **SUB-COMMITTEES**

1. **Health Services :—**

12 members (including the Chairman and Deputy Chairman) and 4 co-opted members.

**Functions :—**

Duties under the relevant Acts in relation to :—

Care of mothers and young children (including Day Nurseries) Welfare Foods.

Care and After Care.

Domestic Help.

Home Nursing.

Health Visiting.

Midwifery.

Vaccination and Immunisation.

Ascertainment of mental deficiency.

Care and After Care in Mental Health.

Certification, etc., under the Lunacy Acts.

Occupation Centre.

2. **Sanitary :—**

12 members (including the Chairman and Deputy Chairman).

**Functions :—**

Duties under the relevant Acts in relation to :—

Environmental Hygiene.

---

## **EDUCATION COMMITTEE.**

22 members (including the Chairman and Deputy Chairman), and 6 co-opted members.

### **SUB-COMMITTEE.**

**Children's Care :—**

11 members (including the Chairman and Deputy Chairman), and 4 co-opted members.

**Functions :—**

The School Health Service.

**STAFF.****MEDICAL.**

*Medical Officer of Health and Principal School Medical Officer :—*

V. N. LEYSHON, M.D. (Lond.), D.P.H.

*Deputy Medical Officer of Health and Deputy Principal School Medical Officer :—*

J. E. MASTERSON, M.B., Ch.B., D.P.H.

*Senior Assistant Medical Officers of Health :—*

W. DRAWNEEK, M.B., B.S. (Lond.), D.P.H.

MARGARET M. F. ROBINSON, M.D. (Belfast), B.A.O., D.P.H.,  
L.M. (Belfast).

*School Medical Officers :—*

E. A. LAVELLE, M.B., Ch.B. (Vict., Manchester).

C. L. NOBLE, M.R.C.S., L.R.C.P.

F. T. HUNT, M.B., B.S. (Lond.), M.R.C.S., L.R.C.P.

M. DUNCAN, M.B., Ch.B. (Edin.).

*Chest Physician :—*

\*HUGH GERARD GRACE, M.B., Ch.B.

*Consultant :—*

\*R. J. M. JAMIESON, M.B., B.Ch., M.R.C.O.G.

*Obstetrician and Gynaecologist.*

*Psychiatrist :—*

\*T. A. RATCLIFFE, M.A., M.B., B.Ch., M.R.C.S., L.R.C.P., D.P.M.,  
D.C.H.

**DENTAL.**

*Principal School Dental Officer :—*

FREDERICK GROSSMAN, L.D.S. (Q.U. Belfast).

*Assistant Dental Officers :—*

MOIRA RIGBY, L.D.S., R.F.P.S. (Glas.).

ELIZABETH S. WOOD, L.D.S. (Glas.).

## NON-MEDICAL.

*Administrative Officer :—*  
R. E. GOODALL.

*Clerks :—*

HEALTH OFFICE 27, SCHOOL CLINIC 10, WELFARE CENTRES 3.

*Head Almoner :—*

RICHARD L. CARABINE, A.M.I.A.

*Almoners :—*

MISS P. A. R. KIDMAN, B.A. (Oxon), A.M.I.A.  
MISS J. LEYLAND, B.A.

*Supervisor of Day Nurseries :—*

MISS M. R. MOSS, S.R.N., Nursery Diploma.

*Day Nurseries :—*

MATRONS 4, STAFF NURSERY NURSES 9, NURSERY ASSISTANTS 7,  
NURSERY STUDENTS 28, WARDENS 2, DOMESTICS 10, CARETAKER 1.

*Senior Duty Authorised Officer :—*

W. V. B. LUCAS.

*Duty Authorised Officers :—*

F. F. WRIGHT.  
MISS A. NETTLETON, B.A. (Admin.).  
MISS A. GRIFFIN.

*Superintendent Health Visitor :—*

MISS E. M. GARDINER, S.R.N., S.C.M.

*Health Visitors, School Nurses and Tuberculosis Nurses :—24*  
(including part-time).

*Supervisor of Home Helps :—*

MRS. E. C. BAKER.

*Assistant Supervisors :—1. Home Helps :—82 PART-TIME.*

*Superintendent of Home Nursing :—*

MISS D. M. CLEWES, S.R.N., S.C.M., H.V. Cert.

*Assistant Supervisors :—1. Home Nurses :—18 FULL-TIME, 2 PART-TIME.*

*Non-Medical—continued.*

*Occupation Centre :—*

SUPERVISOR (Qualified) 1, ASSISTANT SUPERVISORS (Unqualified) 3,  
DOMESTIC 1, \*GUIDES 4.

*Supervisor of Midwives' Home :—*

MISS R. V. E. WATSON, S.R.N., S.C.M., M.T.D.

*Domiciliary Midwives :—* 12.

*Psychologist :—*

MISS E. S. BROUGHTON, M.A., Diploma in Psychology (Oxford).

*Public Analyst :—*

\*R. W. SUTTON, B.Sc., F.R.I.C.

*Remedial Teacher :—*

MISS N. GATELEY, National Froebel Cert.

*Chief Sanitary Inspector :—*

S. PRIME, M.S.I.A.

*Deputy Chief Sanitary Inspector :—*

R. B. DAVIES, M.S.I.A.

*Sanitary Inspectors (All Branches) :—* 5 (6 vacancies).

RODENT CONTROL OFFICER 1, RODENT OPERATORS 4.

*Sewage Works Analyst :—*

\*G. GREENE, A.M.C.T., A.M.Inst.S.P., and four Assistants.

*Speech Therapist :—*

\*MISS S. H. NORTH, L.C.S.T.

MISS M. L. UMIPLEBY, L.C.S.T.

*Remedial Gymnast :—*

GEORGE SOMMERSVILLE, M.S.R.G.

MEDICAL AND DENTAL ATTENDANTS 10, CLEANSING ATTENDANTS 4,  
DISINFECTOR ATTENDANT 1, GENERAL LABOURER 1.

\*WELFARE ASSISTANTS 3, WELFARE DOMESTIC 1.

\*—Part-time.

*As at 31st December, 1955.*

Public Health Department,  
The Council House,  
Corporation Street,  
Derby.

TO THE CHAIRMAN AND MEMBERS OF THE  
HEALTH AND EDUCATION COMMITTEES.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present to you the Annual Report for 1955.

The estimated population has decreased by 300 to 139,300. The birth rate has fallen slightly from 15.03 (1954) to 14.95 (1955). The death rate has increased from 11.70 (1954) to 12.16 (1955). The stillbirth rate has increased from 21.45 (1954) to 24.37 (1955). The infantile death rate has fallen from 27.65 (1954) to 20.65 (1955). There were no maternal deaths during 1955.

Very friendly co-operation existed during the year between the hospitals, general practitioners and the Local Health Authority. Special mention must be made of the close liaison between the Public Health Department and the Local Medical Committee. Problems concerning each other are frequently discussed in a most friendly way, and in every case so far, a satisfactory solution has been found. I consider this co-operation with the general practitioners in the area to be of the utmost importance, as I feel that, in the future, medicine will be best practised by laying emphasis on the domiciliary side.

The work of the various services of the Department is described in detail in the Report.

A student of social studies, and those interested in medical-social problems in the town, will find the various sections of the Report a veritable mine of information, and it is interesting to note that many applications are received from students at various universities for such information.

I should like to close on a personal note and thank you, Mr. Chairman, and all the members of the Health Committee for the assistance, encouragement and support I have invariably received from yourself and them. I should also like to add my appreciation of the friendly advice and help always freely available from the officers of other departments of the Corporation; and finally I wish to thank the entire staff for their willing co-operation and service during the year, which made the somewhat arduous work of the Department both exhilarating and pleasant.

I am,

Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

V. N. LEYSHON.

## I—GENERAL.

## STATISTICAL SUMMARY.

Area of Borough	...	...	...	...	...	...	8,116	Acres.
Elevation above sea level—	...	...	...	highest, Burton Road	...	325 ft.		
		...	lowest, Alvaston Ward	...	126 ft.			
		...	Market Place	...	157 ft.			
Population at Census, 1951	...	...	...	Males	68,551	...	141,267	
		...	Females	72,716	...	...		
Estimated Population for 1955 (Mid-year)	...	...	...	...	...	139,300		
Number of Houses (1951 Census)	...	...	...	...	...	39,641		
,, Inhabited Houses at 31/3/1956 (according to Rate Books)	41,090							
No. of Uninhabited Houses at 31/3/1956 (according to Rate Books, including property scheduled for demolition)	...	...	...	...	...	146		
Number of Families or separate Occupiers (Census, 1951)	...	...	...	...	...	41,944		
Number of persons per acre at Census, 1951	...	...	...	...	...	17.4		
,,        ,,        ,, 1931	...	...	...	...	...	20.0		
Number of persons per House at Census, 1951	...	...	...	...	...	3.56		
,,        ,,        ,, 1931	...	...	...	...	...	3.97		
Rateable Value of the Borough (General Rate)	...	...	...	...	...	£1,099,899		
Estimated amount realised by a Penny Rate	...	...	...	...	...	£4,407		
						Rate per thousand population.		
				1955				
Marriages	...	...	...	...	1,216	...	...	17.46
				Total.	Males.	Females.		
Live Births,—Legitimate	...	1,958	1,051	907				
(Registered)—Illegitimate	...	124	63	61				
— Total	...	2,082	1,114	968	Birth rate	...	14.95	
Birth Rate adjusted by the Area Comparability Factor (0.98) supplied by the Registrar General	...	...	...	...	...	...	14.65	
Still Births (Registered)	...	52	20	32	Rate per 1,000 total births		24.37	
Live Births (notified)	...	2,095	1,119	976				
Deaths	...	1,694	869	825	Death rate	...	12.16	
Death Rate adjusted by the Area Comparability Factor (1.03) supplied by the Registrar General	...	...	...	...	...	...	12.52	
Percentage of Total Deaths occurring in Public Institutions	...					41.97		
Excess of Births registered over Deaths	...	...	...	...	...	388		

Deaths from Puerperal Causes—						Rate per 1,000 total (live and still) births.
			Deaths.			
Puerperal Sepsis	...	...	—	...	...	—
Other Puerperal Causes	...	—	...	...	...	—
Total	...	...	—	...	...	—

Deaths of Infants under one year of age—

Legitimate, 43. Illegitimate, —. Total, 43.

Death Rate of infants under one year of age per 1,000 live births—

Legitimate, 21.91. Illegitimate, —. Total, 20.65.

Death Rate of infants under four weeks of age—

Total, 31. Per 1,000 live births, 14.89.

Deaths from Measles (all ages)	...	...	...	...	...	1
„ Whooping Cough (all ages)	...	...	...	...	...	—
„ Diarrhoea (under two years of age)	...	...	...	...	...	—

## BIRTHS.

Birth-rate, 1955 ... ... ... ... ... ... 14.95

The Births registered during the year numbered 2,082, as compared with 2,098 in 1954.

## DEATHS.

					Rate per 1,000 population.
Zymotic Diseases	...	...	...	...	2 0.015
Tuberculosis of Respiratory System	...	...	...	22	0.15
Other Tuberculous Diseases	...	...	...	2	0.015
Respiratory Diseases	...	...	...	204	1.46

## NATIONAL STATISTICS :—

	E. & W.	COUNTY BORBOURGS (including London).	SMALLER TOWNS.	LONDON ADMINISTRATIVE COUNTY.	DERBY.
Birth Rate	15.0	14.9	14.9	15.1	14.95
Death Rate	11.7	11.6	11.6	11.5	12.16
Infantile Mortality (per 1,000 Births)	24.9	25.1	25.2	23.2	20.65

## Causes of, and Ages at Death, during 1955.

CAUSES OF DEATH.	All Ages.	DEATHS IN OR BELONGING TO WHOLE DISTRICT AT SUBJOINED AGES.													TOTAL DEATHS IN PUBLIC INSTITUTIONS		
		0-1	2-3	4-5	10-15	20	25	35	45	55	65	75	Residents.	Non-Residents.	Non-Civilian		
Tuberculosis, Respiratory	22							2	5	4	7	3	1	12	3		
Tuberculosis, Other	2	1								1				2	2		
Syphilitic Disease	5										1	2	2	3	2		
Diphtheria																	
Whooping Cough																	
Meningococcal Infections	1	1								1				1			
Acute Poliomyelitis	1													1	1		
Measles	1	1												1	1		
Other Infective and Parasitic Diseases															2		
Malignant Neoplasm—																	
Stomach	46							1	2	5	11	12	15	17	18		
Lung, Bronchus	58							1	4	8	22	17	6	24	13		
Breast	27								2	6	8	3	8	8	16		
Uterus	10								1	3	4	2		4	3		
Other Malignant and Lymphatic Neoplasms	108			1	1			2	7	11	24	33	29	46	75		
Leukæmia, Aleukæmia	6			1					1	1	1			2	5	15	
Diabetes	7									2	4	1		4	8		
Vascular Lesions of Nervous System	240							1	1	10	33	69	126	97	57		
Coronary Disease, Angina	277								6	26	47	105	93	79	73		
Hypertension with Heart Disease																	
49											8	14	27	16	11		
Other Heart Disease	282								1		8	13	72	188	79	45	
Other Circulatory Disease	91										4	7	25	55	30	31	
Influenza	8							1				4	3	1			
Pneumonia	113	4						1	2		5	9	21	71	91	36	
Bronchitis	71	1							1	2	18	29	20	13	18		
Other Diseases of Respiratory System	20			1						3	4	3	5	4	10	10	
Ulcer of Stomach and Duodenum	17									2	5	4	6	14	16		
Gastritis, Enteritis and Diarrhoea	7	2									2	3	5	6			
Nephritis and Nephrosis	18							1		5	3	3	4	2	13	9	
Hyperplasia of Prostate	9											3	6	8	14		
Pregnancy, Childbirth, Abortion															2		
Congenital Malformations	20	8	2	1	2	1		1	2	3					14	14	
Other Defined and Ill-Defined Diseases	133	27	1	1	1			3	3	14	16	26	40	83	133		
Motor Vehicle Accidents	16					1		2	6		2	2		3	14	21	
All Other Accidents	18		1					1		3		2	5	6	11	23	
Suicide	11							1	1	2	5	2		5	1		
Homicide and Operations of War																	
Totals	1694	43	5	2	5	4	3	5	23	48	127	248	464	717	711	679	

## Causes of Death during 10 Years, 1946-1955.

CAUSE OF DEATH.	YEARS.									
	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955
Tuberculosis, Respiratory .. ..	55	55	58	71	38	52	25	21	22	22
Tuberculosis, Other .. ..	8	12	13	11	7	3	4	2	1	2
Syphilitic Disease .. ..	8	12	11	4	3	13	6	8	4	5
Diphtheria .. ..	..	1	..	..	..	..	..	..	..	..
Whooping Cough .. ..	4	1	3	3	5	..	..	..	..	..
Meningococcal Infections .. ..	..	1	1	4	..	1	1	1	3	1
*Acute Poliomyelitis .. ..	..	..	1	1	..	..	..	..	..	1
Measles .. ..	..	..	2	..	..	..	2	1	..	1
†Other Infective and Parasitic Diseases .. ..	..	..	..	..	3	4	1	3	3	..
Malignant Neoplasms .. ..	231	250	228	256	298	265	265	244	256	249
†Leukæmia, Aleukæmia .. ..	..	..	..	..	8	8	10	7	11	6
Diabetes .. ..	10	14	13	9	15	13	11	5	10	7
Vascular Lesions of Nervous System ..	144	152	168	179	187	235	219	215	203	240
Heart Disease .. ..	422	504	442	533	455	535	566	556	553	608
Other Circulatory Disease .. ..	68	71	68	82	87	120	118	103	101	91
Influenza .. ..	13	10	..	8	6	50	..	8	2	8
Pneumonia .. ..	73	84	55	73	80	120	76	110	80	113
Bronchitis .. ..	90	106	70	81	87	113	50	77	69	71
Other Diseases of Respiratory System ..	20	22	23	19	10	13	12	14	21	20
Ulcer of Stomach and Duodenum ..	24	16	25	18	26	32	24	26	19	17
‡Gastritis, Enteritis and Diarrhoea ..	9	42	16	8	13	6	5	5	8	7
Nephritis and Nephrosis .. ..	27	32	37	25	20	18	10	11	16	18
†Hyperplasia of Prostate .. ..	..	..	..	..	20	17	10	9	20	9
Pregnancy, Childbirth and Abortion ..	3	5	3	1	1	..	..	1	2	..
§Congenital Malformations .. ..	33	37	23	33	16	13	20	18	10	20
Other Defined and Ill-defined Diseases ..	186	238	246	284	236	185	111	136	151	133
Motor Vehicle Accidents .. ..	15	11	4	12	11	6	8	18	8	16
All Other Accidents .. ..	24	26	33	27	17	21	17	21	38	18
Suicide .. ..	14	11	15	15	17	17	14	16	22	11
Homicide and Operations of War .. ..	..	..	..	..	..	..	..	..	1	..
ALL CAUSES—TOTALS .. ..	1481	1716	1556	1756	1666	1860	1585	1636	1634	1694

†—Included with "All Other Causes" prior to 1950.

\*—Combined with "Polio-Encephalitis" prior to 1950.

‡—"Diarrhoea (under 2 years of age)" only prior to 1950.

§—Combined with "Birth Injuries, etc." prior to 1950.

**Burials.**—The total burials in the Derby cemeteries for the year 1955 were 1,419, 1,329 ordinary burials and 90 still-born.

**Inquests held during 1955.**—These numbered 92—65 males and 27 females.

**Mortuary.**—Dead bodies received during the year, 135. Post-mortem examinations, 245.

THE PRINCIPAL CAUSES OF DEATH — 1955

Other Heart Disease	331
Coronary Disease—Angina	277
Cancer—All Sites	255
Vascular Lesions of Nervous System	240
All Other Causes	141
Pneumonia	113
Other Circulatory Diseases	91
Bronchitis	71
Respiratory Tuberculosis	22
Congenital Malformations	20
Other Diseases of Respiratory System	20
Nephritis	18
All Other Accidents	18
Ulcer of Stomach and Duodenum	17
Motor Vehicle Accidents	16
Suicide	11
Hyperplasia of Prostate	9
Influenza	8
Diabetes	7
Gastritis, Enteritis and Diarrhoea	7
Other Tuberculosis	2
Total Number of Deaths	1,694
	50
	100
	150
	200
	250
	300

TABLE I

BIRTH RATE PER 1,000 LIVING —

DEATH RATE PER 1,000 LIVING - - -

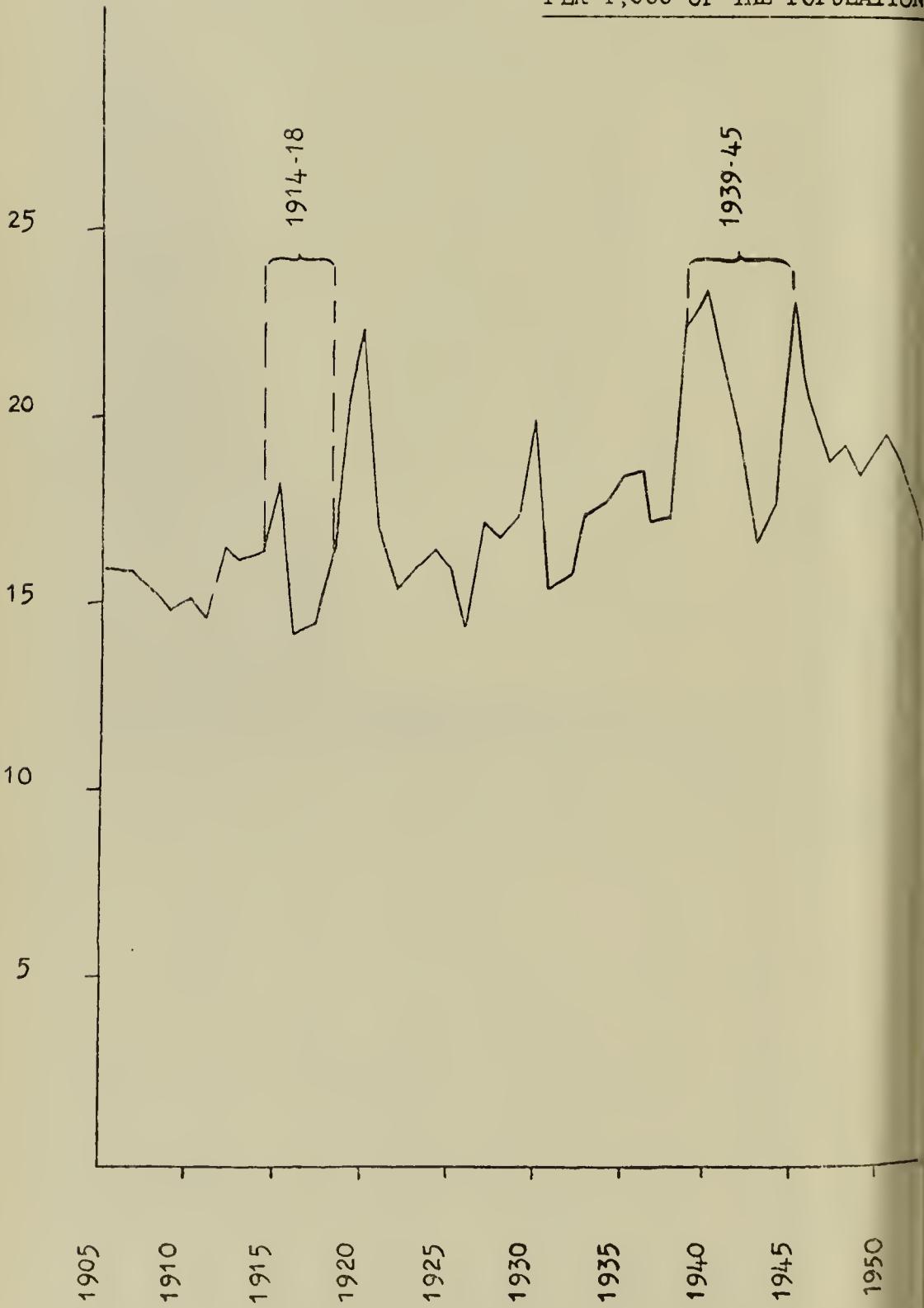


TABLE II

## PERSONS MARRIED

PER 1,000 OF THE POPULATION

Rate per 1,000 of the population.



Percentage.

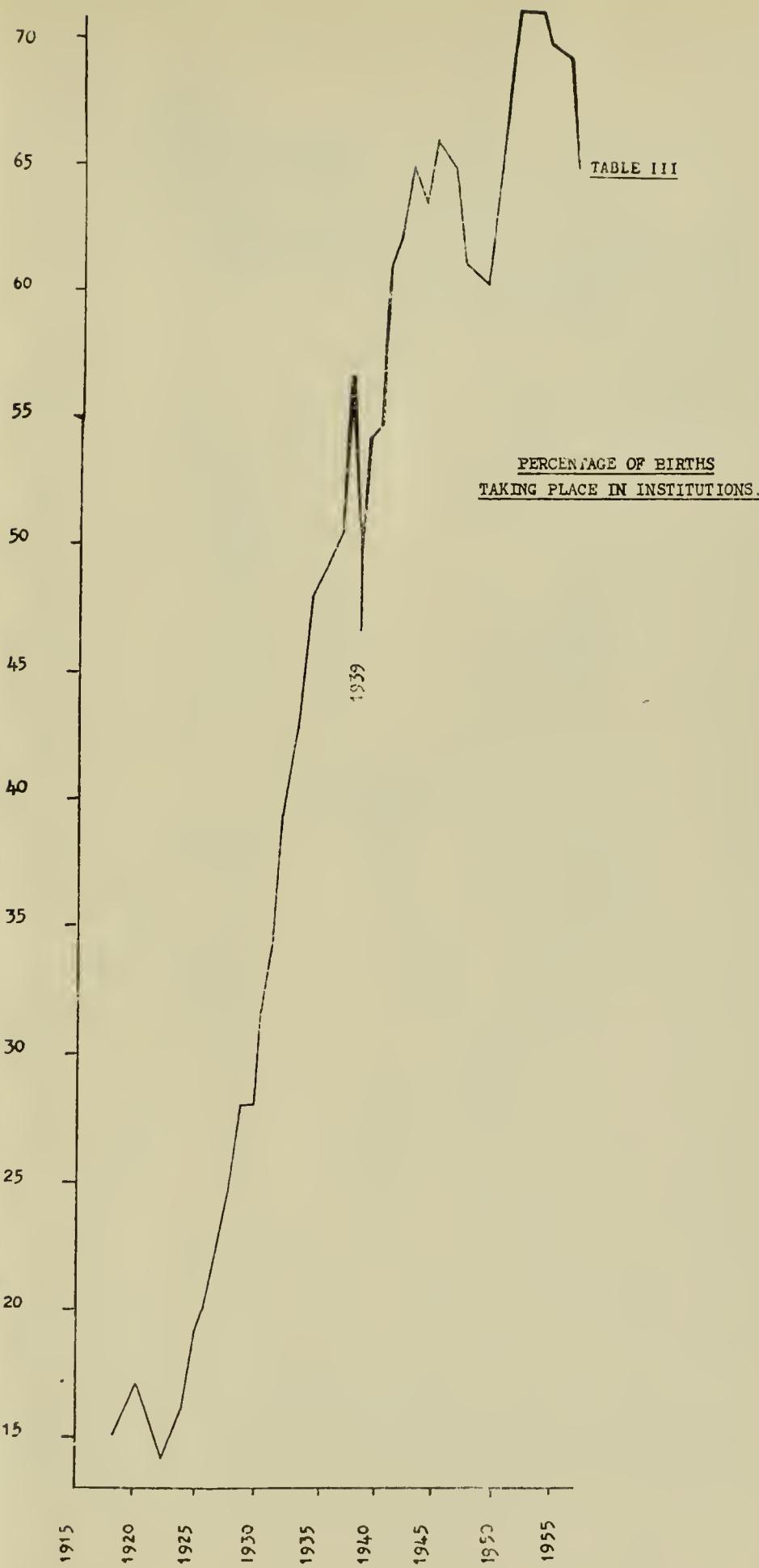


TABLE IV

Infantile Mortality Rate

per 1,000 Live Births

Maternal Mortality Rate

per 1,000 Births

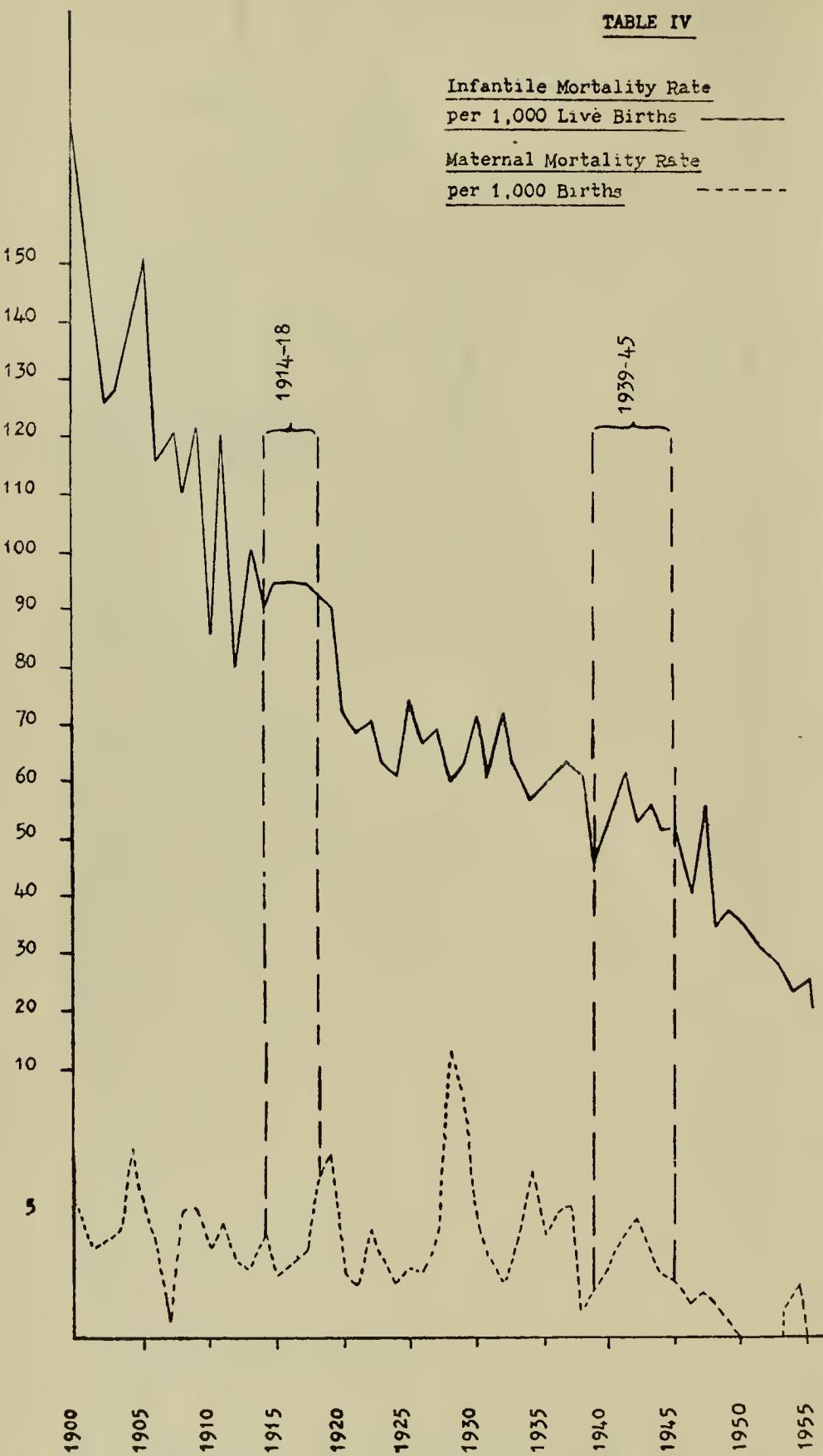


TABLE V

TUBERCULOSISNotifications of all formsDeaths from all forms

PHTHISIS  
OTHER FORMS  
NOTIFIABLE.

1914-18

1939-45

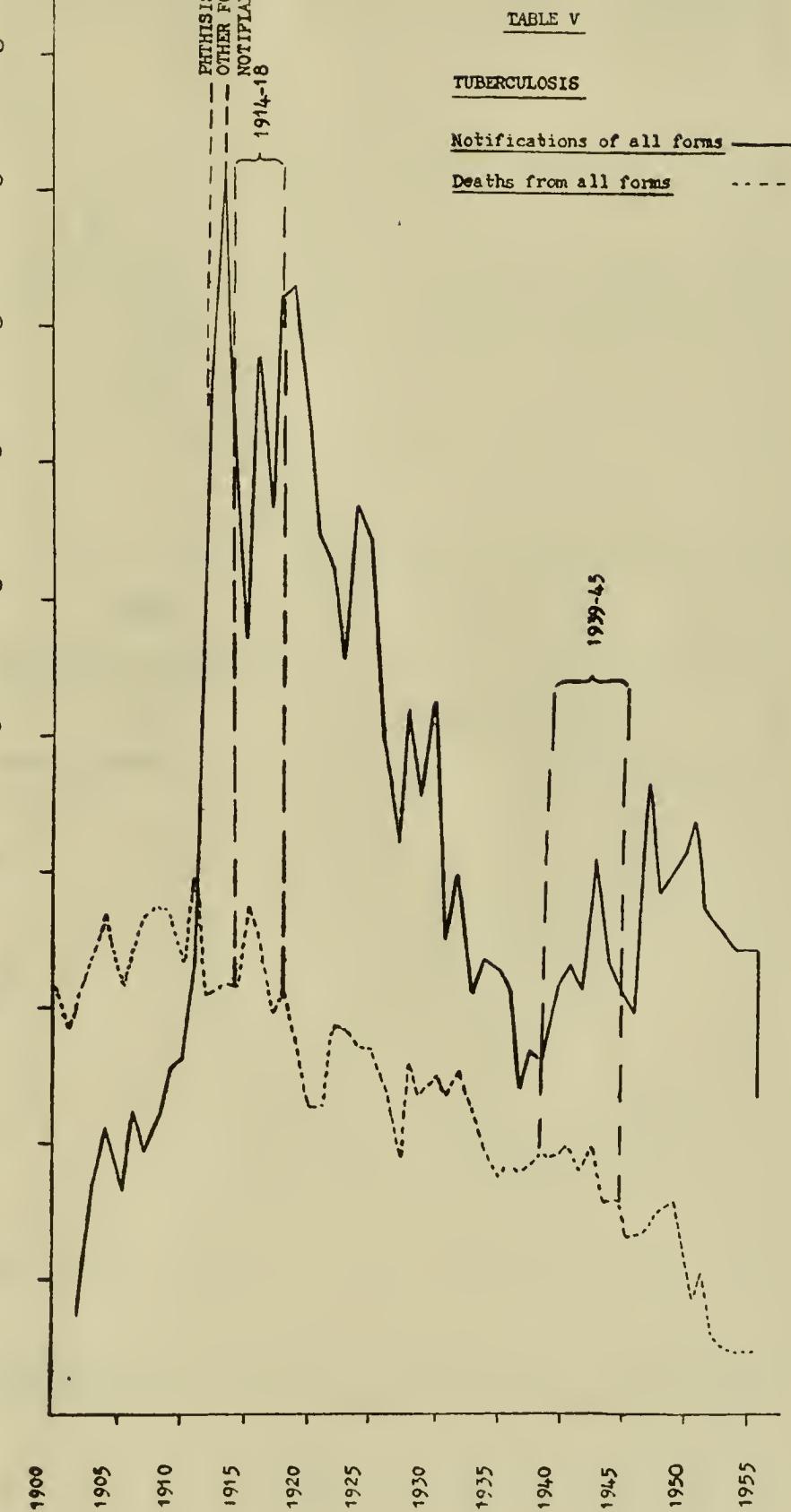
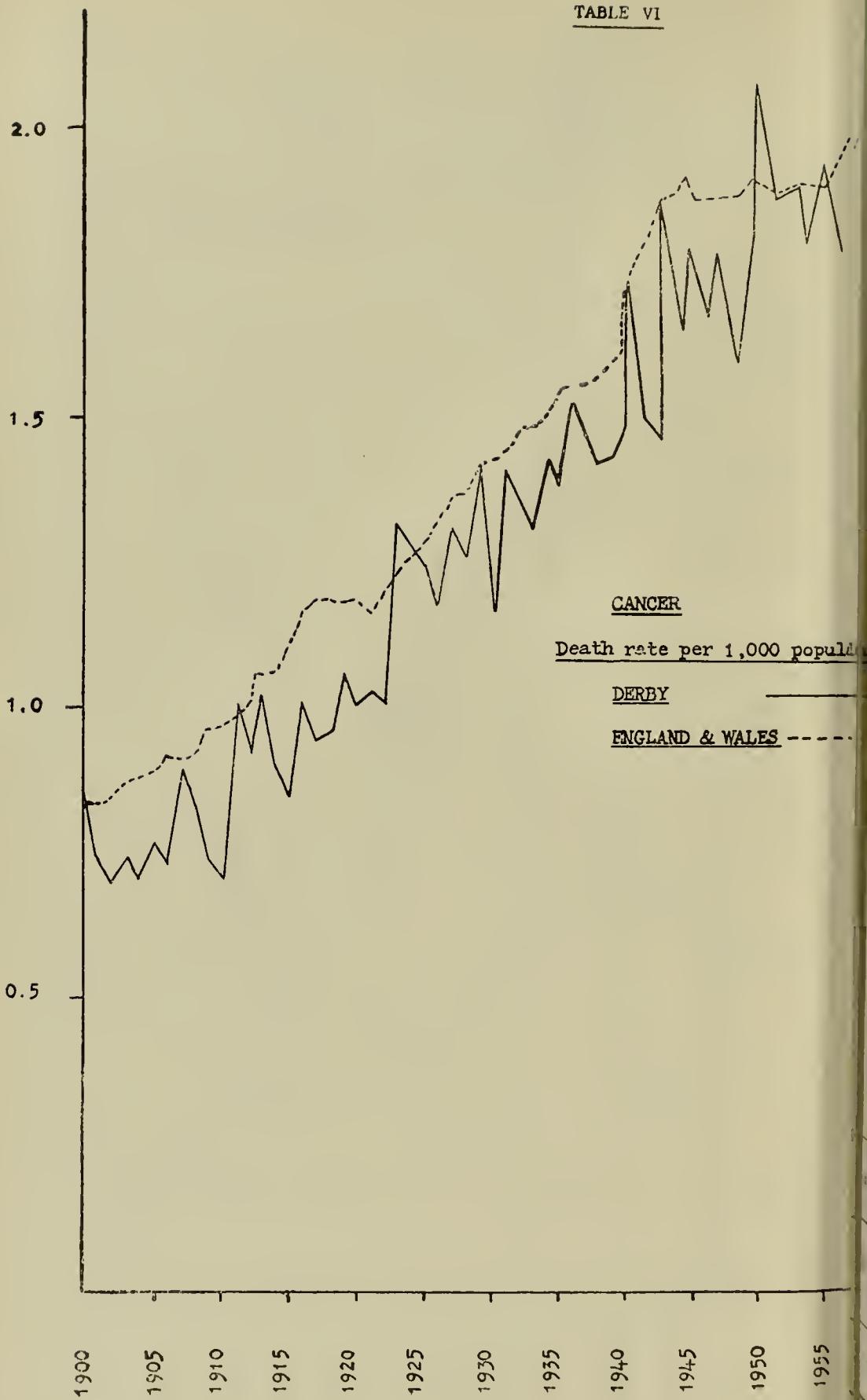


TABLE VI

Rate per 1,000 population.



## II—MATERNITY AND CHILD WELFARE.

### Midwives.

During the period 1st February, 1955, to the 31st January, 1956, 66 midwives gave notice of intention to practise within the Borough.

45 were attached to institutions (20 at the City Hospital, 13 at the Queen Mary Maternity Home and 12 at the Nightingale Maternity Home) and 21 (including 8 health visitors) were in domiciliary practice. All the domiciliary midwives practising in the Borough were under the direct control of the Health Department.

There were no midwives practising privately in the Borough during the year.

5 midwives removed from the area during the year, leaving 12 in domiciliary practice and 41 in institutional practice at the end of the year.

During the above-mentioned period, 1 midwife who was attached to the Queen Mary Maternity Home and 1 who was attached to the City Hospital gave notice of intention to practise as maternity nurses.

The following are details of maternity cases attended by midwives practising in the area of the Local Supervising Authority during the year :—

NUMBER OF DELIVERIES ATTENDED BY MIDWIVES IN THE AREA DURING THE YEAR.

	Domiciliary Cases.				Cases in Institutions.	
	Doctor Not Booked.		Doctor Booked.			
	Doctor present at delivery.	Doctor not present at delivery.	Doctor present at delivery (either the booked Doctor or another).	Doctor not present at delivery.		
a) Midwives employed by the Authority ...	27	448	79	193	747	
b) Midwives employed by Hospital Management Committees ...	—	—	—	—	2,800	
TOTALS ... ...	27	448	79	193	747	
					2,800	

Number of cases delivered in institutions but attended on discharge from institutions and before the 14th day.

(a) by domiciliary midwives	...	...	173
(b) by health visitors	...	...	346
<hr/>			
519			
<hr/>			

Since March, 1953, it has been the normal procedure of this Authority to split these visits between the domiciliary midwives and the health visitors, the latter doing all visits at ten days or over, except still-birth cases and baby deaths occurring in hospital, which are visited exclusively by domiciliary midwives.

There were 13 domiciliary midwives practising in the Borough throughout the year and all of them had been approved by the Central Midwives Board as teachers of pupil midwives.

747 confinements (including non-residents) were attended by domiciliary midwives.

254 ante-natal and post-natal clinic sessions were attended.

3,478 domiciliary ante-natal visits were made.

10,496 domiciliary visits during the lying-in period were made.

943 domiciliary post-natal visits to institutional discharges were made.

No maternal deaths occurred in cases attended by domiciliary midwives.

A very high standard of service has been maintained by the domiciliary midwives during the year, in spite of the extra work caused by the lying-in visits to hospital cases discharged before the 10th day.

### **Medical Aid.**

Out of the 747 confinements attended by domiciliary midwives, medical aid was sought in 127 cases as follows:—

102 on account of mother or expectant mother.

23 „ „ „ baby.

2 „ „ „ mother and baby.

The following table shows the various reasons for the calling in of medical aid :—

## **Mothers.**

## ANTE-NATAL.

## NATAL.

Delayed delivery (mainly second stage)	...	...	...	...	14
Breech presentation	...	...	...	...	8
Premature labour	...	...	...	...	2
Retained placenta	...	...	...	...	1
Uterine inertia	...	...	...	...	1
Unstable presentation	...	...	...	...	1
Various (forceps delivery, maternal distress, etc.)	...	...	...	...	4
					31

## POST-NATAL.

## Babies.

### Notification of Artificial Feeding.

326 notifications were received, 64 from domiciliary midwives and 262 from institutions, as follows :—

	<i>Domiciliary.</i>		<i>Institutions.</i>	
	<i>Residents.</i>	<i>Non-Residents.</i>	<i>Residents.</i>	<i>Non-Residents.</i>
<i>Substitution on account of :—</i>				
Insufficient Laetation ... ...	26	—	33	45
Other Causes ... ...	24	—	76	61
<i>Supplementary on account of :—</i>				
Insufficient Laetation ... ...	14	—	18	25
Other Causes ... ...	—	—	2	2
Total ... ...	64	—	129	133

### Notification of Liability to be a Source of Infection.

15 notifications were received, 5 from domiciliary midwives and 10 from institutions, as follows :—

	<i>Domiciliary.</i>		<i>Institutions.</i>	
	<i>Residents.</i>	<i>Non-Residents.</i>	<i>Residents.</i>	<i>Non-Residents.</i>
Mothers ... ... ... ...	5	—	6	4
Infants ... ... ... ...	—	—	—	—
Total ... ... ...	5	—	6	4

### Notification of Death.

37 notifications were received, all from institutions, as follows :—

	<i>Domiciliary.</i>		<i>Institutions.</i>	
	<i>Residents.</i>	<i>Non-Residents.</i>	<i>Residents.</i>	<i>Non-Residents.</i>
Mothers ... ... ... ...	—	—	—	—
Infants ... ... ... ...	—	—	9	28
Total ... ... ...	—	—	9	28

### Notification of having Laid out a Dead Body.

3 notifications were received as follows:—

Domiciliary.		Institutions.	
Residents.	Non-Residents.	Residents.	Non-Residents.
1	—	2	—

### Ante-Natal Clinics.

				Sessions.	Women Attending.	First Attendances.	Total Attendances.
Green Street	...	...	...	48	484	380	2,442
Boulton	...	...	...	48	149	111	730
Roe Farm	...	...	...	51	136	110	839
Amber Street	...	...	...	52	168	132	846
Temple House	...	...	...	50	280	234	1,347
Total				249	1,217	967	6,204

### Post-Natal Clinics.

#### GREEN STREET.

104 attendances were made at 36 post-natal sessions.

#### TEMPLE HOUSE.

33 attendances were made at ante-natal sessions.

#### ROE FARM.

55 attendances were made at ante-natal sessions.

#### AMBER STREET.

27 attendances were made at ante-natal sessions.

#### BOULTON.

26 attendances were made at ante-natal sessions.

### Consultant Clinic.

#### GREEN STREET.

5 attendances were made at 5 sessions.

## Maternal Mortality.

There were no maternal deaths during 1955.

## Births.

3,653 notifications were received during 1955 under Sec. 203 Public Health Act, 1936. Of these, 2,095 were live births and 54 were still-births relating to Derby residents. 1,459 were live births and 45 were still-births relating to non-residents. The details were as follows:—

	LIVE BIRTHS.				STILL-BIRTHS.				Total Non-Residents. No. Lives.	Total Residents. No. Lives.		
	Doctor				Doctor							
	Booked.		Not Booked.		Booked.		Not Booked.					
	Present.	Not Present.	Present.	Not Present.	Present.	Not Present.	Present.	Not Present.				
RESIDENTS :—												
Domiciliary ...	80	194	24	441	—	—	3	8	—	750		
NON-RESIDENTS :—												
Domiciliary ...	1	2	—	2	—	—	—	—	5	—		
TOTAL ...	81	196	24	443	—	—	3	8	5	750		

	LIVE BIRTHS.				STILL-BIRTHS.				Total Non-Residents. No. Lives.	Total Residents. No. Lives.		
	Doctor				Doctor							
	Present.		Not Present.		Present.		Not Present.					
	Present.	Not Present.	Present.	Not Present.	Present.	Not Present.	Present.	Not Present.				
RESIDENTS :—												
Institutional ...	245		1,111		15		28		—	1399		
NON-BEDRESIDENTS :—												
Institutional ...	344		1,110		12		33		1499	—		
TOTAL ...	589		2,221		27		61		1499	1399		

1,399, or 65.1%, of total births relating to residents took place in institutions. 2,082 births were registered.

### Still-Births.

99 still-births were notified. 54 were in respect of Derby residents and 45 non-residents. There were 90 burials of still-born children in the Derby cemeteries during the year. 52 still-births were registered in respect of Derby residents. Percentage of still-births to live births registered was 2.5.

54 still-births were investigated.

### Analgesia.

At the end of the year all of the 13 domiciliary midwives were qualified to administer analgesics in accordance with the requirements of the Central Midwives' Board. 16 sets of apparatus were in use by these midwives.

During the year analgesics were administered in domiciliary confinements, as shown under, compared with previous years :—

Year.	No. of Confinements.	Analgesics Administered.	Percentage.
1951 ... ...	628	520	82.80
1952 ... ...	611	491	80.36
1953 ... ...	668	525	78.59
1954 ... ...	669	511	76.38
1955 ... ...	747	581	77.78

Pethidine was administered in 462 domiciliary confinements.

### Share of Premature Infants.

Total number of premature babies notified during the year whose mothers are normally resident within the Borough ... ...	167
(a) Born at home ... ... ... ...	49
(b) Born in hospital ... ... ... ...	118

Weight at Birth.	PREMATURE LIVE BIRTHS.									PREMATURE STILL-BIRTHS	
	† Born in Hospital.			Born at home and nursed entirely at home.			Born at home and transferred to hospital on or before 28th day.			Born in Hospital.	Born at Home
	Total.	Died within 24 hrs. of birth.	Survived 28 days.	Total.	Died within 24 hrs. of birth.	Survived 28 days.	Total.	Died within 24 hrs. of birth.	Survived 28 days.		
(a) 3 lb. 4 oz. or less... (1,500 gms. or less).	7	3	1	—	—	—	3	—	2	16	2
(b) Over 3 lb. 4 oz., up to and including 4 lb. 6 oz. ... ... (1,500—2,000 gms.)	25	3	19	—	—	—	5	—	5	5	2
(c) Over 4 lb. 6 oz., up to and including 4 lb. 15 oz. ... ... (2,000—2,250 gms.)	29	—	28	—	—	—	6	—	6	1	—
(d) Over 4 lb. 15 oz., up to and including 5 lb. 8 oz. ... ... (2,250—2,500 gms.)	57	3	53	29	—	29	6	—	4	7	1
Totals ...	118	9	101	29	—	29	20	—	17	29	5

†—The group under this heading will include cases which may be born in one hospital and transferred to another.

Premature babies born on the district weighing less than  $4\frac{1}{2}$  lbs. were transferred to the Premature Baby Unit; others were visited by domiciliary midwives until they reached the weight of 6 lbs.

### **Infantile Mortality during the year 1955.**

Deaths from stated causes at various ages under one year of age.

CAUSE OF DEATH.				Under 1 Week	1-2 Weeks	2-3 Weeks	3-4 Weeks	Total under 1 Month	1-3 Months	3-6 Months	6-9 Months	9-12 Months	Total Deaths under One Year.
Common Infectious Diseases.	Measles	...	...	...	...	...	...	...	...	...	...	...	...
	Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...
	Diphtheria: Croup	...	...	...	...	...	...	...	...	...	...	...	...
	Whooping Cough	...	...	...	...	...	...	...	...	...	...	...	...
	Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...
	Influenza	...	...	...	...	...	...	...	...	...	...	...	...
Diarrhoeal Diseases.	Diarrhoea, all forms including	...	...	...	...	...	...	...	...	...	...	...	...
	Enteritis, Muco-enteritis,	...	...	...	...	...	...	...	...	...	...	...	...
	Gastro-enteritis, &c.	...	...	...	...	...	...	...	...	...	...	...	...
i. Wasting Diseases.	Gastritis	...	...	...	...	...	...	...	...	1	...	...	...
	Premature Birth	...	15	...	...	...	...	...	...	...	...	...	...
	Congenital Defects	...	3	3	...	...	...	...	...	...	...	...	...
	Injury at Birth	...	...	...	1	...	...	...	7	...	...	1	2
	Atelectasis	...	...	...	...	...	...	...	...	1	...	...	...
Tuberculous Diseases.	Atrophy, Debility, Marasmus	...	...	...	...	...	...	...	...	...	...	...	...
	Tuberculous Meningitis	...	...	...	...	...	...	...	...	1	...	...	1
	Other Tuberculous Diseases	...	...	...	...	...	...	...	...	...	...	...	...
	Abdominal Tuberculosis	...	...	...	...	...	...	...	...	...	...	...	...
Other Causes.	Meningitis (not Tuberculous)	...	...	...	...	...	...	...	...	...	...	...	...
	Convulsions	...	...	...	...	...	...	...	...	...	...	...	...
	Bronchitis	...	...	...	...	...	...	...	...	1	...	...	1
	Pneumonia	...	1	...	...	...	...	...	1	...	2	...	4
	Suffocation, overlying	...	...	...	...	...	...	...	...	...	...	1	...
	Syphilis	...	...	...	...	...	...	...	...	...	...	...	...
	Laryngitis	...	...	...	...	...	...	...	...	...	...	...	...
	Other Causes	...	8	...	...	...	...	8	1	1	...	1	11
	TOTALS	...	27	3	1	...	31	3	6	...	3	43	

Births	Legitimate 1,958	Deaths	Legitimate Infants 43	Infantile Mortality 21.91	20.65
registered	Illegitimate 124	registered	Illegitimate " "	" "	per 1,000 reg'd Births

## Attendances at Welfare Centres in 1955.

CENTRE.	Sessions held.	No. of individuals attending.	Attendances.		Number of Children		First Attendances.		Babies entirely artificially fed at first visit.																				
			Children.	Seen by Doctor.	Total.	Under 1 year.	Total.	Under 1 month.	Total.	Under 1 month.	Total.	6-9 months.	1-3 months.	6-9 months.	1-3 months.	Total.													
Boulton	100	344	2,153	1,629	357	193	93	31	2,303	2,219	314	82	80	28	12	516	73	35	6	7	1	122	13	135	24	15	4	43	
Nightingale Road	102	470	2,386	1,901	398	153	113	67	2,632	2,568	370	101	69	38	36	614	80	39	8	2	2	131	34	165	22	8	2	32	
Pear Tree	100	525	3,183	2,560	435	155	97	37	3,284	3,276	405	138	86	53	22	704	133	53	16	2	3	207	11	218	36	37	10	2	85
Normanton	103	390	1,677	1,234	269	130	108	66	1,807	1,735	331	106	78	48	41	604	79	42	10	6	2	139	7	146	17	12	6	6	41
Temple House	100	626	4,086	3,320	643	155	54	32	4,204	4,181	406	123	82	31	21	663	154	97	21	7	6	285	18	303	39	52	18	6	115
Rykneld	99	317	2,030	1,645	318	99	51	10	2,123	2,087	253	86	49	23	4	415	66	41	6	3	—	116	8	124	33	15	2	1	51
Roe Farm	72	285	1,208	923	197	75	73	23	1,291	1,263	260	83	37	33	15	428	43	31	4	1	1	80	6	86	13	16	7	1	37
Green Street	122	517	2,728	2,204	376	129	68	31	2,808	2,784	350	135	58	42	22	607	120	79	10	7	1	217	5	222	46	40	8	3	97
Mackworth	100	667	4,012	3,305	561	140	94	57	4,157	4,106	421	115	48	32	21	637	147	120	18	5	1	291	10	301	37	68	13	4	122
<b>Total</b>	898	4,141	23,463	18,721	3,554	1,229	751	354	24,609	24,219	3,110	969	587	328	194	5,188	895	537	99	40	17	1,588	112	1,700	267	263	7023	623	

**Ophthalmia Neonatorum.**—Cases notified, 2.

Further information and the table required by the Ministry will be found on page 82.

**Pemphigus Neonatorum.**—No cases were notified during the year.**Children of Pre-School Age.**

During the year under review, routine medical inspection was carried out in 1,156 children of two, three and four years of age. Of this number, 304 were admitted to school during the year and particulars of the treatment of those cases are included in that part of the Report dealing with school children. Of the remaining 852 routine medical inspections, 206 children were referred for treatment and 465 placed under observation. In a number of these cases, children with more than one defect are included under both headings. The number of individual children requiring treatment or observation, or both, was 576. In addition, 194 re-inspections and 15 special examinations were made.

Below is a statement of cases, showing the numbers of children of pre-school age which were referred to the various clinics during the year :—

Ultra-Violet Ray Clinic	...	...	...	...	17
Orthopædic Clinic	...	...	...	...	96
Aural Clinic	...	...	...	...	4
Dental Clinic	...	...	...	...	561

Attention has been paid by the health visitors throughout the year to the conditions of the children's hair. Once again we have to report a very low incidence of infestation among those examined.

**Welfare Foods.**

During the year the distribution point at Reigate Drive, a private house, was closed owing to the illness of the occupier, who was a W.V.S. worker. No alternative arrangement was made as it was felt that, with the removal to larger premises of the Welfare Centre at Mackworth, the district was adequately served.

The remaining thirteen smaller centres continued to be staffed by voluntary workers. No alterations were made in the arrangements regarding method of payment by stamps and bulk deliveries by the Ministry's transport contractors to the main centre at the Council House.

During the twelve months ended 31st December, 1955, 29,569 free coupons and 189,712 coupons bearing postage stamps to the value of £6,161 15s. 10½d. were destroyed by burning in the presence of officers of the Department, in accordance with the Ministry of Health's instructions.

The following table sets out the issues made at each centre, from which it will be seen that approximately 75% were made from the main distribution point at the Health Department.

### Summary of Issues at Distribution Centres.

Distribution Point.	N.D.M.		Cod Liver Oil.	Vitamin A & D Tablets.	Orange Juice.
	Full Cream.	Half Cream.			
Health Dept. Main Centre ..	70,509	2,217	12,704	6,557	71,820
Temple House .. ..	1,357	24	284	122	1,418
Boulton .. .. ..	2,901	19	688	156	2,987
Nightingale Road .. ..	3,229	25	453	130	1,914
Pear Tree .. .. ..	4,859	59	1,242	361	5,023
Normanton .. .. ..	1,623	8	636	228	2,637
Roe Farm .. .. ..	1,757	37	485	108	1,862
Rykneld .. .. ..	1,561	9	330	74	1,264
Green Street .. .. ..	1,091	27	299	80	1,027
Mackworth .. .. ..	3,711	45	701	269	3,201
*Reigate Drive .. ..	79	—	40	7	114
W.V.S., Full Street .. ..	190	—	58	40	414
City Hospital .. .. ..	—	—	—	164	565
Nightingale Maternity Home ..	—	—	119	857	2,641
Queen Mary Maternity Home ..	—	—	—	96	332
 Totals .. .. ..	92,867	2,470	18,039	9,249	97,219

\*—Closed 9th April, 1956.

### Work of the Health Visitors.

Report by Miss E. M. Gardiner, Superintendent Health Visitor.

1955 has again been a year of trial and error, and the difficult task of retaining the best of those methods already in use, and eliminating those which have proved to be impracticable, continues.

The "problem family" specialist visiting, commenced with such high hopes, has been abandoned because of overwhelming difficulties. The Ministry of Health has made the suggestion that, "health visitors' work could be redeployed on a more selective basis, so that more time is devoted to those families where problems are likely to arise or are known to exist."

On consideration of this, the burden of the "problem families" has been shouldered by all the health visitors, each in her own particular area. Maybe the more concentrated visiting will bear fruit, but we cannot look for speedy results.

The number of such families has gradually increased over the last few years, probably because the standard of living has risen for the majority, but the unstable, very small minority, who appear to be lacking in initiative, have not been able to "rise" unassisted.

The after-care of the diabetic patients in their own homes has proceeded satisfactorily, and the results so far have been beyond expectation. For the perplexed, ambulant patient this educative service is doing untold good and in the years to come the beneficial results obtained will be proof of this.

As the health visitors' work has been extended to include the care of the whole family, a great many after-care visits have been paid to patients discharged from hospital. Numerous visits have also been paid to elderly patients and help obtained for them in co-operation with other departments of the Health Service.

In the course of Public Health education, a number of senior students from the Children's Hospital have accompanied the health visitors for a day, and had an insight into the work accomplished in homes and at the Welfare Centres.

As a result of a talk given in the Diocesan Training College, a number of student teachers became interested in helping the elderly and chronic sick of the town. Subsequent visits from these warm-hearted students considerably brightened the lives of these people, and the help they received was very much appreciated.

The after-care of the sick child has continued slowly but surely, and great hopes are entertained that chronic hospitalisation of children may soon be a thing of the past, and that accidents in the home will be averted by timely education of the mother.

During the year a big mothercraft competition (including a "quiz") was held. In the adjudicator's words, the general standard was excellent and showed much improvement over previous years. Over 250 mothers entered for the competition.

Talks and lectures to Mothers' Clubs, Young Wives' Fellowship, Women's Institutes, etc., have been given throughout the year.

The Mother and Baby Home in Vernon Street has again been visited regularly and instruction and help in mothercraft and hygiene given to the residents. Other Talks were given to the girls, and committee meetings have also been attended.

In all, 62,000 home visits have been paid by the health visitors during 1955.

## SUMMARY.

## 1. MOTHERS.

Visits re expectant mothers, 1st visits	...	...	...	...	245
,,    ,,    ,,    total visits	...	...	...	...	2,148
,,    ,,    mothers (post-natal)	...	...	...	...	1,903

## 2. CHILD WELFARE.

Visits re births	...	...	...	...	2,013
Revisits re births (under 1 year)	...	...	...	...	11,187
,,    ,,    children (1 to 2 years)	...	...	...	...	5,755
,,    ,,    (2 to 5 years)	...	...	...	...	13,518
Visits re deaths of infants (under 1 year)	...	...	...	...	5
,,    ,,    ,,    (over 1 year)	...	...	...	...	2
,,    ,,    premature babies	...	...	...	...	100
Revisits re premature babies	...	...	...	...	209

## 3. INFECTIOUS DISEASES (excluding tuberculosis).

Visits re infectious diseases	...	...	...	...	775
-------------------------------	-----	-----	-----	-----	-----

## 4. OTHER PUBLIC HEALTH WORK.

Visits re adoption	...	...	...	...	88
Special visits (including investigations)	...	...	...	...	1,529
Visits re after-care (hospital discharges)	...	...	...	...	434
,,    ,,    chronic sick (geriatric patients)	...	...	...	...	348
Revisits re    ,,    ,,    ,,	...	...	...	...	64
Visits re "problem families"	...	...	...	...	152
,,    ,,    after-care (diabetic patients)	...	...	...	...	980
,,    to clinics with film-strip projector	...	...	...	...	39

## 5. MISCELLANEOUS.

Unsuccessful visits (out, removals, etc.)	...	...	...	...	6,390
Assisting at infant welfare sessions	...	...	...	...	1,073
,,    ,,    ante-natal clinics	...	...	...	...	197
,,    ,,    post-natal clinics	...	...	...	...	56
,,    ,,    consultation clinics	...	...	...	...	13
Attending committee meetings	...	...	...	...	23
Talks and lectures given to students, clubs, etc.	...	...	...	...	12

**The Unmarried Mother and Child.**

The Derby and Derbyshire Association for the Help and Protection of Girls has been able to carry on with the hostel which was opened in 1944. A close liaison has been maintained between the Local Authority and the Association. In 1955, 3 Borough residents were cared for in the hostel, and 21 expectant mothers were admitted to homes elsewhere.

I am indebted to Mrs. Mary Morling, Moral Welfare Worker, for the following report on the work of the Diocesan Moral Welfare Association in the Borough.

"The number of cases has slightly decreased, but the number of married men named as putative fathers in the Borough is nearly double that of 1954.

"Case work is extremely complicated and full of difficulties demanding a great deal of time. The applicants for help are glad of advice and assistance and girls are quite ready to go to one of our Homes. There is also much genuine appreciation on the part of the parents for the arrangements made and care given to their daughters, and many requests from them that advice and guidance be continued after leaving the Home.

"The Christmas mail brought in many letters of thanks and in some cases donations toward the work.

"Many girls have kept their babies and are happily married, although not always to the father of the child. Three girls were confirmed while at a Home and are making their regular Communion.

"The matrimonial cases cause much anxious thought and it is felt that the real cause of the breakdowns is the lack of Christian training in the homes, Church attendance and careful teaching regarding the solemnity of marriage.

"There are many inquiries on the part of older married couples wishing to adopt a child and there are quite a number of happy applicants whose wishes have been granted.

"Quite a number of affiliation orders have been granted by the Court and much gratitude is expressed to our Hon. Solicitors for all the time they give to this side of the work for us. Their kindness and patience is outstanding, as is also that of the Court officials and the Police.

"During my enforced absence from the office the Almoners' Department has, through the kindness of Dr. Leyshon, given advice and practical help with some of our cases. We express our most grateful thanks both to them and to Dr. Leyshon.

"The co-operation between the Local Authority, the Police and ourselves is very pleasing, and my thanks are due for this opportunity of reporting on our work."

**Case Work, 1955.**

Interviews in the office	...	...	...	...	...	698
New cases	...	...	...	...	...	33
Cases active from 1954	...	...	...	...	...	17
After-care	...	...	...	...	...	12
Single girls with babies	...	...	...	...	...	21
Married women with babies	...	...	...	...	...	1
Matrimonial cases	...	...	...	...	...	1
Carnal knowledge	...	...	...	...	...	1
Alien cases from Home Office and N.C.U.M.C.	...	...	...	...	...	2
Jamaican cases	...	...	...	...	...	1
Putative fathers :—						
Single men	...	...	...	...	...	15
Married men	...	...	...	...	...	15
Affiliation orders	...	...	...	...	...	6
Girls to home	...	...	...	...	...	27
Girls married	...	...	...	...	...	10
Girls confirmed	...	...	...	...	...	3
Courts and assizes	...	...	...	...	...	9

**CHILDREN.**

Babies to homes	...	...	...	...	...	1
For adoption through registered societies	...	...	...	...	...	11
Applications to adopt	...	...	...	...	...	7

**Day Nurseries.**

Report by Miss M. R. Moss, Supervisor of Day Nurseries.

The responsible task of caring for the children who attended the four Derby day nurseries gave the staff their usual busy but happy year.

Priority admissions (children of widows and unmarried mothers and children whose fathers were incapacitated, etc.) continued to be accepted at a reduced fee and the people concerned benefited considerably from this service. Other admissions, although both parents were working, resulted in the increased well-being of the child and provided an incentive for the mother to maintain the improvement. This was most noticeable where the husband was doing two years national service. Short cases (illness of mother, confinements, etc.) were dealt with as the emergencies arose.

The appreciation by the parents of the day nursery service is apparent and often letters are received from grateful parents when their child leaves. A quotation from a typical letter reads as follows :—

“I would like to thank the matrons and staff for the kindness shown to Christopher. We feel that under their careful training and care he has been given a firm grounding, which will help him through his school days.”

The attendance at the four day nurseries throughout the year is shown in the following record :—

Children accommodated and number of children on the waiting lists for the year 1955 :—

			0-2 years.	2-5 years.
No. of approved places	...	...	70	110
No. of children on the register, 1/1/55	...	...	65	142
No. of children admitted during the year	...	...	86	141
No. of children discharged during the year	...	...	44	178
No. of children on the register, 31/12/55	...	...	66	142
<b>Average daily attendance</b>	...	...	50	107
No. of applications for admission	...	...		436
No. of applications for admission outstanding,				
<b>31/12/55</b>	...	...	...	341

Medical examination of all new children with periodic inspections during the year were maintained. Immunisation against diphtheria and whooping cough continued and together with regular, routine care, including a balanced diet, comfortable sleep, sufficient exercise and fresh air, and security in the absence of their mothers, etc., the standard of each child's health was kept at a good level. It is interesting to note that an individual child, who on admission may be below standard, improves remarkably with regular attendance.

The number of staff employed at the end of the year was as follows :—

	<i>Ford Street.</i>	<i>Kitchener Avenue.</i>	<i>St. Mark's Road.</i>	<i>"The Armstrong"</i>	<i>"The Ashtree"</i>	<i>Osmaston Road.</i>	<i>Total.</i>
Matrons ... ... ...	1	1	1	1	1	1	4
Staff Nursery Nurses ... ...	2	2	2	2	3	3	9
Nursery Assistants ... ...	1	2	3	3	1	1	7
Wardens ... ... ...	1	—	—	—	1	1	2
Students ... ... ...	6	6	9	9	8	8	29
							51

The training of students for the National Nursery Certificate continues. The number of students in training during the year was nineteen. One of these students sat for the Supplementary Certificate in Infant Care and was successful ; ten were second year students and eight were first year students.

Of the ten second year students who sat their Diploma examination in July, nine passed and the other successfully resat in December. Of these ten who qualified, two were promoted to nursery assistants to obtain further experience in the day nurseries, two entered for general nursing training, one commenced nursery teacher's training and five obtained posts in Social Welfare departments.

In January, Dr. A. Morrison (late Deputy Medical Officer of Health) generously presented a silver cup to the Department, to be given each year to the "Best Student of the Year." This honour was won for the years 1953-54 by Miss Ada Bridgewater, who was trained at "The Ashtree", Osmaston Road day nursery. Dr. V. N. Leyshon, Medical Officer of Health, gave us an illuminating address regarding Dr. Morrison's wonderful service in Derby. It is hoped that this much coveted trophy will be an incentive to the staff to maintain their present high standard in caring for the nursery children and, in so doing, assist Dr. J. E. Masterson, our new Deputy Medical Officer of Health.

The admission fees for children were increased on the 1st September, 1955, as follows :—

Where there is only one income ... ...	From 1/6d. to 1/9d.
Where there are two incomes ... ...	„ 3/0d. „ 3/9d.

The occasion of the Annual Staff Dance held at the Assembly Rooms was very successful, and from the proceeds we were able to have a visit from Father Christmas (complete with toys) which ended the year happily for each child.

**Nursing Homes.**

Registered at 31st December, 1955	...	...	...	...	...	—
(1) Applications for registration	...	...	...	...	...	—
(2) Applications for registration withdrawn	...	...	...	...	...	—
(3) Homes registered	...	...	...	...	...	—
(4) Orders made refusing or cancelling registration	...	...	...	...	...	—
(5) Appeals against such Orders	...	...	...	...	...	—
(6) Cases in which Orders have been—						
(a) Confirmed on appeal	...	...	...	...	...	—
(b) Disallowed	...	...	...	...	...	—
(7) Number of applications for exemption from registration	...	...	...	...	...	1
(a) Granted	...	...	...	...	...	1
(b) Withdrawn	...	...	...	...	...	—
(c) Refused...	...	...	...	...	...	—
On register at end of year	...	...	...	...	...	Nil

**Nurseries and Child-Minders Regulation Act, 1948.**

Three daily minders are registered under the above Act, providing altogether for five children. These children have been visited at approximately fortnightly intervals.

One nursery, for 16 mentally defective children, organised by the Derby and Derbyshire Association of Parents of Backward Children, is registered with the Authority.

### III.—DENTAL SERVICES.

Report by Mr. F. Grossman, Principal School Dental Officer.

Another year's work was carried out under the handicap of a still further depleted staff. It is fortunate that the remaining officers on our staff are dental surgeons of long experience in school dentistry, as their knowledge and experience enables them to select the type of work that is of a more constructive nature, while, at the same time, keeping in mind a policy of doing the greatest good for the greatest number. By judicious selection, the most important and useful treatment is spread as widely as possible and is of the utmost value.

Dental disease continues to hold its unenviable position of being the most widespread disease of modern civilisation, and, indeed, since the war years, the dental condition of school children appears to have deteriorated. One is left wondering how much this may be due to the greater availability once again of what might be called luxury foods, for there is no doubt that one common contributor to dental decay is the fermentation of sticky particles of food left on teeth after eating such carbo-hydrates as sweets, biscuits and the like. It is somewhat astonishing to find that it is still a common practice for children to be given biscuits and milk last thing at night before going to sleep and after having brushed their teeth.

It is well recognised that sound teeth and a healthy mouth have much to do with the well-being of the body as a whole. To perform this task with any degree of success, especially in these times of understaffing, full use will have to be made of preventive as well as remedial means, and in this direction mention was made in last year's report to the fluoridation of water supplies. This measure, in which minute quantities of fluoride are added to the drinking water, is considered to be a means of retarding the onset of dental decay, and has been introduced in four cities in this country for further research. If this produces successful results, it may well be that fluoridation of public water supplies may become an essential health project to combat dental disease.

#### Personnel.

Once again I have to report the loss of a whole-time officer during the year in the departure of Mrs. B. Ward on March 31st, and, despite repeated advertisements, the vacancy still exists. This further resignation has brought our present staff of assistant officers to 50% of the approved establishment, and the present rate of recruitment to the service in general gives little encouragement in hoping to build up to full strength again for some time. Wastage in the profession as a whole (due to death, retirements, etc.) is greater than the intake of new entrants to the dental schools, and, as private practice appears still to be the more attractive side of dentistry, the public dental service faces a very discouraging outlook.

Some years ago, the Minister of Education accepted the expert finding that the ratio of whole-time officers to children in local authority dental schemes should be in the region of 1 to 3,500 if proper dental care was to be given. In Derby, with its school population of over 20,000, we now have only three officers, and, when allowance is made for that part of the service allotted to expectant and nursing mothers and pre-school children (the priority classes), the rate is in the region of 1 to 8,000.

During the second half of the year, a medical practitioner was engaged to give general anaesthetics for five sessions per week, thereby releasing a similar amount of a dental officer's time for purely dental work and affording some relief of the pressure.

Some concern arose when the national scale of salaries for dental attendants was introduced in 1954 and revised in 1955. The scale compared unfavourably with the previous scale, which was adopted by this Authority for both dental attendants and clerical staff.

The dental attendant is an important and very necessary part of the staff of a local authority's dental service. She is the "buffer" between the dental officer on the one hand and the parent and children on the other, and, as such, she must be possessed of much patience, tolerance and tact, be pleasant, yet business-like, and be the means of creating that atmosphere so comforting to the child about to undergo dental treatment. At the chair-side, where she must anticipate the officer's every move, her duties call for care and precision, while her clerical work consists of a system of filing and record-keeping. I am gravely anxious about the effects these new conditions will have in obtaining and keeping the right type of person for this work.

### Premises.

The branch clinic at the City Hospital, where one of our dental officers gave a proportion of his time to the hospital services in return for the use of the premises, and where we had carried out the treatment of grammar school pupils, was discontinued in April. As the shortage of dental officers became acute, it was apparent that we could no longer afford to spare service for the hospital, and at the same time surgery space had become available at the Central Clinic at Temple House. This re-arrangement has since enabled the officer concerned to devote the whole of his time to local authority duties, and, although it was anticipated at one time that the change-over might be coincidental with the opening of the new dental clinic, unforeseen difficulties prevented this happening. These difficulties have now been surmounted and the move to new premises will take place in the near future.

## THE SCHOOL DENTAL SERVICE.

### Inspections.

As in the case of the previous year, it was impossible, on account of staff shortage, to inspect the whole of the school children during the year, and a number of routine school inspections had to be deferred until the current year. The present position is that schools can be visited only once in eighteen months, instead of annually, as has been the practice for so many years.

Experience has shown that the interval between periodic inspections should not exceed six months if proper care and control of dental caries is to be maintained. It needs but little imagination, therefore, to realise the danger of a situation which allows many teeth to get beyond repair before they can be treated, resulting in pain from toothache, the increased possibility of ill-health from oral sepsis, and, at the same time, the waste of much of the work of previous years because of lack of timely maintenance.

At these inspections, children of all age groups were inspected, totalling 11,165, of which 20.6% were considered to be dentally fit, 16.7% slightly defective, and 62.7% requiring treatment. Of the 7,318 requiring treatment, it was possible to refer 5,912, and of these 76.9% consented to treatment. Table 1 gives these details of the children per age group as well as per school, and of the response to our offer of treatment in the case of each school.

### Treatment.

These conditions reflected not only on the amount, but also on the type of treatment carried out. The more urgent calls of toothache and mouths containing septic teeth have to be answered by radical means, using time and effort that could be more gainfully spent in simple and timely measures of saving teeth before they reach these conditions. Some cases having dental defects in the early stages have frequently to be passed by, many of which join the urgent cases sooner or later.

Until research discovers the means to prevent dental decay, the only satisfactory solution is to have sufficient forces to remedy it.

11,536 attendances at the Clinic were made by 7,635 children following treatment:—

- (a) *Fillings*.—5,317 were inserted in 4,730 permanent teeth.
- (b) *Extractions*.—2,557 permanent teeth and 10,482 temporary teeth.
- (c) *Anæsthetics*.—6,198 general anæsthetics (Nitrous Oxide and Oxygen) and 13 local anæsthetics were administered.
- (d) *Other operations*.—13 dentures were provided and 48 orthodontic appliances were constructed for simple cases of irregularities. Also 115 X-ray films were taken during the year.

Table 3 (page 46) gives these details in tabulated form.

## **Orthodontics.**

It has been stated that more than 50% of the school population have, to some degree, anomalies of the teeth. Of this number, a proportion require no treatment, while others can be—and locally are—corrected by means of appropriate extraction treatment, or the use of simple appliances in the mouth. What is of the greatest importance, however, is the percentage of these cases which call for specialised treatment. It should be noted that only trained specialists in orthodontics can properly fulfil this requirement, and such consultants are few in number and usually to be found only in large cities or attached to dental schools. A recent Ministry circular suggested that specialist orthodontists attached to Regional Hospital Boards or Boards of Teaching Hospitals, might meet this need by giving part-time service to each of a number of authorities in the same area and an approach has been made seeking this service.

## **PRIORITY DENTAL SERVICES.**

### **Inspection and Treatment.**

There was a necessary curtailment of the services allotted to priority classes, and a consequent fall in the number of expectant mothers inspected and treated. The figure became still lower by the closing in April of the branch clinic at the City Hospital, where those cases, formerly dealt with by our staff, came under the care of the hospital dental staff. After that date, expectant and nursing mothers were dentally inspected at the five ante-natal clinics, while all treatment for those requiring it was undertaken at the central clinic. The number of inspections and treatments of nursing mothers remained much the same as those of previous years.

We continued the treatment of pre-school children referred from the various child welfare clinics, as well as those for whom direct application was made to the dental clinic. The number dealt with was very similar to that of last year. The negligible amount of conservative treatment that can be given to this group is lamentable, but there is no further time available for more. The time when organised routine inspection of these young children can be undertaken has still not arrived.

In conclusion, I wish to place on record my grateful thanks to the whole of the dental staff, who have given me such able and generous support throughout the year's work.

TABLE 1. ROUTINE DENTAL PERCENTAGES, 1955.

SCHOOL.	Sound.	Defective but not requiring Treatment.	Requiring Treatment.	RESULT OF M.14's.		
				Consent.	Refusal.	No Reply..
Abbey ..	—	—	—	—	—	—
Allenton ..	23.1	6.5	70.4	73.4	14.4	12.2
Ashgate ..	—	—	—	—	—	—
Beaufort ..	9.0	21.6	69.4	77.9	18.6	3.5
Becket ..	8.3	21.6	70.1	78.7	16.7	4.6
Bemrose ..	35.3	3.3	61.4	78.7	13.7	7.6
Boulton ..	10.5	25.7	63.8	80.5	17.5	2.0
Brackensdale ..	—	—	—	—	—	—
Castle ..	—	—	—	—	—	—
Central ..	—	—	—	—	—	—
Christ Church ..	—	—	—	—	—	—
College ..	—	—	—	—	—	—
Dale ..	24.3	17.4	58.3	71.5	22.7	5.8
Derby ..	—	—	—	—	—	—
Derwent ..	15.0	10.3	74.7	81.1	13.2	5.7
Firs Estate ..	14.1	29.5	56.4	82.8	11.7	5.5
Hardwick ..	—	—	—	—	—	—
Homelands ..	—	—	—	—	—	—
Joseph Wright ..	43.8	.7	55.5	89.4	10.6	—
King's Mead ..	17.1	22.5	60.4	62.8	30.2	7.0
Lancaster ..	31.4	5.9	62.7	53.5	20.9	25.6
Markeaton ..	28.9	12.4	58.7	81.1	14.9	4.0
Moorhead ..	27.5	28.6	43.9	74.4	16.3	9.3
Nightingale ..	7.6	24.3	68.1	84.9	12.9	2.2
Normanton ..	18.4	26.1	55.5	85.1	11.0	3.9
Parkfields Cedars ..	—	—	—	—	—	—
Pear Tree ..	—	—	—	—	—	—
Roe Farm ..	—	—	—	—	—	—
Rosehill ..	23.2	9.7	67.1	73.1	25.7	1.2
Rykneld ..	21.6	5.8	72.6	51.7	22.2	26.1
St. Chad's ..	48.5	27.2	24.3	76.0	24.0	—
St. Dunstan's ..	34.9	24.3	40.8	65.9	31.7	2.4
St. James' ..	—	—	—	—	—	—
St. John's ..	29.8	27.1	43.1	69.2	15.4	15.4
St. Joseph's ..	18.1	17.1	64.8	77.3	10.3	12.4
St. Luke's ..	—	—	—	—	—	—
St. Mary's ..	—	—	—	—	—	—
St. Paul's ..	—	—	—	—	—	—
St. Peter's ..	27.1	27.1	45.8	65.6	15.6	18.8
Sinfin ..	26.1	12.0	61.9	75.5	16.7	7.8
Southgate ..	25.8	12.7	61.5	70.0	21.0	9.0
Sturgess ..	28.5	5.0	66.5	71.0	26.4	2.6
Temple House ..	—	—	—	—	—	—
Wilmorton ..	30.2	22.6	47.2	72.9	20.3	6.8
Reigate ..	25.5	35.5	39.0	76.3	11.3	12.4

## AGE GROUPS.

5 years of age ..	28.1	36.3	35.6
6 " " " ..	18.1	35.7	46.2
7 " " " ..	13.5	30.3	56.2
8 " " " ..	10.8	19.9	69.3
9 " " " ..	8.8	14.3	76.9
10 " " " ..	14.6	12.0	73.4
11 " " " ..	20.6	10.9	68.5
12 " " " ..	22.6	5.3	72.1
13 " " " ..	29.2	2.6	68.2
14 " " " ..	30.0	1.2	68.8
15 " " " ..	37.5	—	62.5
16 " " " ..	44.2	—	55.8
17 " " " ..	44.1	—	55.9
18 " " " ..	36.4	—	63.6

TABLE 2.

## INSPECTION AND TREATMENT.

1. No. of pupils inspected by the Authority's Dental Officers :—	6. Half-days devoted to :—
(a) Periodic Groups :—	(a) Inspection .. .. 83
Aged (up to)	(b) Treatment .. .. 1,354
5 years .. .. 1,281	TOTAL .. .. 1,437
6 " .. .. 1,149	
7 " .. .. 1,163	
8 " .. .. 1,162	
9 " .. .. 952	
10 " .. .. 1,024	
11 " .. .. 1,157	
12 " .. .. 1,189	
13 " .. .. 1,116	
14 " .. .. 1,011	
15 " .. .. 339	
16 " .. .. 77	
17 " .. .. 34	
18 " .. .. 11	
19 " .. .. —	
Total .. .. 11,665	
(b) Specials .. .. 3,333	
(c) TOTAL (Periodic and Specials) .. .. 14,998	
2. No. found to require treatment	10,651
3. No. referred for treatment ..	9,245
4. No. actually treated .. .. 7,635	10. Administrations of Anæsthetics :—
5. Attendances made by pupils for treatment .. .. 11,536	General .. .. 6,198
	Local .. .. 13
	TOTAL .. .. 6,211
	11. Other Operations :—
	Permanent Teeth .. .. 848
	Temporary Teeth .. .. 1
	Dentures .. .. 73
	Orthodontic Appliances .. .. 48
	Denture Repairs .. .. 12
	X-rays .. .. 115
	TOTAL .. .. 1,097

TABLE 3.

SHOWING INSPECTIONS AND TREATMENTS CARRIED OUT  
AT EACH OF THE DENTAL CENTRES.

1955.	TEMPLE HOUSE.				CITY HOSPITAL		ANTE-NATAL INSPECTION CLINICS.			TOTALS.		
	Expectant Mothers.	Nursing Mothers.	Young Children.	Miscel- laneous.	Expectant Mothers.	Nursing Mothers.	Roe Farm.	Boulton.	Temple House.			
Attendances .. ..	266	228	672	16	213	28	56	70	155	235	122	2,061
Cases examined .. ..	19	63	561	4	125	19	55	70	154	234	119	1,423
Needing treatment .. ..	19	62	526	4	83	18	36	49	97	137	73	1,104
Referred for treatment .. ..	19	60	525	4	42	15	16	36	63	63	41	885
" to own dentist .. ..	—	—	2	—	—	—	6	5	21	47	20	133
Refused treatment .. ..	—	—	—	1	—	1	4	3	1	7	6	24
Treatment inadvisable .. ..	—	—	—	—	10	—	10	5	12	20	6	63
Failed to attend .. ..	—	—	2	—	4	—	3	14	11	8	54	
Treated .. ..	19	58	525	4	38	15	13	24	49	52	32	829
Made dentally fit .. ..	11	25	444	1	20	5	4	7	20	22	10	569
Awaiting treatment .. ..	—	—	—	—	—	—	—	—	—	—	1	1
Extractions .. ..	328	212	1,382	2	244	34	—	—	—	—	—	2,202
Local Anæsthetics .. ..	14	6	—	—	6	—	—	—	—	—	—	26
General Anæsthetics .. ..	115	48	609	1	79	11	—	—	—	—	—	863
Fillings .. ..	—	—	—	3	12	—	—	—	—	—	—	15
Scalings and Gum treatments .. ..	—	2	—	—	—	—	—	—	—	—	—	2
Silver Nitrate treatments .. ..	—	—	—	—	—	—	—	—	—	—	—	—
Other operations .. ..	116	153	—	3	7	7	12	—	—	—	—	298
Radiographs .. ..	12	2	—	1	—	—	—	—	—	—	—	15
Denture Patients .. ..	30	37	—	—	2	1	3	—	—	—	—	73
Full Dentures .. ..	18	29	—	—	—	1	1	—	—	—	—	48
Partial Dentures .. ..	26	28	—	—	2	1	3	—	—	—	—	60
Dentures Repaired .. ..	—	1	—	—	—	1	—	—	—	—	—	2

TABLE 4.

## SHOWING THE NATURE OF THE TOTAL SERVICES GIVEN TO THE PRIORITY CLASSES AT ALL THE DENTAL CENTRES.

(a) *Numbers provided with dental care:*

	New Cases this Year.						Failed to keep appointment.	Treated by us.	Made dentally fit.	Awaiting Treatment.	Attendances made at Clinic.
	Examined.	Need-ing Treatment.	Our Treatment Clinie.	Own Dentist.	Re-fused Treatment.	Treat-ment inad-visable.					
Expectant Mothers	776	494	280	129	22	63	52	227	95	1	1,117
Nursing Mothers	82	80	75	4	1	—	2	73	30	—	256
Children under five ...	561	526	525	—	1	—	—	525	444	—	672

(b) *Forms of dental treatment provided:*

	Extractions.	Anæsthetics.		Fillings.	Scalings and for Gum Treatments.	Silver Nitrate Treatments.	Other Operations.	Radiographs.	Dentures.							
									Provided.	Repaired.						
		Local.	General.						Complete.	Partial.						
Expectant Mothers ...	572	20	194	—	—	—	123	12	18	27	1					
Nursing Mothers ...	246	6	59	—	2	—	165	2	30	31	1					
Children under five	1,382	—	609	3	—	—	3	1	—	—	—					

## IV.—SCHOOLS AND SCHOOL CHILDREN.

Report by Dr. J. E. Masterson, Deputy Medical Officer of Health and Deputy Principal School Medical Officer.

### GENERAL REVIEW.

The medical staff position improved during the latter part of 1955. Dr. Dean, who had been with us for a number of years, took another appointment in August, and Dr. Drawneek returned to the Corporation at the same time, after successfully completing his Course for the D.P.H. Dr. Drawneek, however, did not return to the School Health Service, but took over the work that I had previously done in the Health Department.

We were fortunate during the same month to obtain the services of Dr. Hunt and Dr. Duncan, and they are both very able and useful members. To fill the remaining vacancy, Dr. Morrison, who retired as a full-time officer, and Dr. Dalziel were able to do part-time work during the year.

The whole Department has been very glad that Dr. Morrison has been able to do this, and I personally am most grateful to him. At all times he has been very willing to give his assistance, and his vast experience over many years has been most helpful.

Unforeseen difficulties prevented the completion of Normanton Clinic during 1955, but, at the time of writing this Report, the opening day has been fixed, and a start has been made on the building of a further clinic at Mackworth. This clinic is urgently needed, and when it is opened the whole town will be adequately served.

Over the past few years, the number of children recommended for U.V.R. treatment has declined, and it was decided at the beginning of the year that the number of cases did not warrant using two buildings for this purpose. Accordingly the U.V.R. Clinic at Temple House was closed, and all children needing this treatment receive it at Green Street.

The speech therapists in the past have had to share buildings—an unsatisfactory state of affairs—but, when the U.V.R. Clinic at Temple House closed, it was decided to convert it into a permanent Speech Therapy Clinic. This has proved very satisfactory and more cases have been treated. As a result, the waiting list has been virtually eliminated.

## **SCHOOL ATTENDANCE.**

The accommodation in Primary and Secondary Schools is 26,551. The number of names on the books is 22,709 and the average attendance is 20,556.

## **THE SCHOOL HEALTH SERVICE IN RELATION TO MAINTAINED PRIMARY AND SECONDARY SCHOOLS.**

### **Medical Inspection.**

*Number of Children inspected.*—The total number of children inspected was 8,164. Of these, 4,310 were boys and 3,854 were girls. In addition, 85 children were brought forward for special examinations by head teachers.

The number of entrants to the Junior Departments tested for vision and hearing was 2,245. Of this number, 189 children were found to have defective vision, and 36 had some degree of defective hearing.

## **FINDINGS AT PERIODIC INSPECTION.**

### **General Condition.**

The general condition of the 8,164 pupils inspected in 1955 was classified as follows :—

A (Good)	...	...	3,989
B (Fair)	...	...	4,139
C (Poor)	...	...	36

### Heights and Weights.

Age.	Year.	BOYS.			GIRLS.		
		Number examined.	Average Height (inches).	Average Weight (lbs.).	Number examined.	Average Height (inches).	Average Weight (lbs.).
5 years ..	1912	440	40.27	39.42	462	40.16	35.56
	1915	443	40.6	38.9	464	40.5	38.04
	1919	499	40.7	39.4	496	40.3	39.1
	1925	851	41.3	40.4	838	41.0	39.3
	1935	842	41.8	41.6	779	41.7	40.6
	1946	466	42.3	43.0	439	41.8	41.3
	1952	750	43.3	43.8	737	42.9	42.0
	1953	992	43.1	43.2	914	42.8	42.2
	1954	870	43.4	43.7	897	43.0	42.2
	1955	810	43.5	43.3	730	43.1	42.1
8 years ..	1915	775	47.9	51.04	703	47.1	49.6
	1919	975	48.2	53.2	872	47.6	51.8
	1925	810	47.8	53.0	767	47.5	51.5
	1935	949	49.2	56.3	969	48.8	55.4
	1946	406	49.4	56.9	402	48.4	54.4
10 years ..	1947	854	53.5	68.8	768	53.5	67.1
	1952	477	53.5	70.4	510	53.4	68.1
	1953	892	53.7	70.2	791	53.7	68.6
	1954	861	54.0	71.5	826	53.9	71.5
	1955	967	54.3	72.3	965	54.0	71.1
12 years ..	1915	801	54.4	71.2	861	54.8	71.5
	1919	841	53.1	70.2	915	54.8	73.4
	1925	858	54.8	72.3	901	55.7	74.6
	1935	784	56.3	78.2	854	57.3	81.4
	1946	251	56.4	79.7	246	57.7	81.7
14 years ..	1947	425	62.8	104.4	364	62.0	106.3
	1952	770	62.9	107.2	644	62.0	107.7
	1953	599	63.4	108.3	817	62.0	107.5
	1954	913	62.1	109.3	773	62.1	111.1
	1955	789	63.2	109.7	755	62.1	111.4

Consequent upon the raising of the school leaving age from fourteen to fifteen in 1947, the ages for the intermediate and final periodic medical inspections were changed from eight and twelve to ten and fourteen respectively.

### **Visual Defects and External Eye Disease.**

The percentage of children found to have defective vision was 21.3.

In the ten and fourteen year old groups, the percentages of children who were unable to read 6/6, 6/6, were :—

<i>10 year boys.</i>	<i>10 year girls.</i>	<i>14 year boys.</i>	<i>14 year girls.</i>
17.8	21.7	18.9	24.6

In the same age groups, the percentages of children with more serious defects (6/12 or worse in either one or both eyes) were :—

<i>10 year boys.</i>	<i>10 year girls.</i>	<i>14 year boys.</i>	<i>14 year girls.</i>
8.1	8.7	8.2	9.9

The number of pupils, aged 10 years and over, noted as requiring treatment was 634 (12.4%).

The number of partially sighted children as judged by the accepted criteria is nine.

### **Squint.**

The number of children in the five year old group found to have a squint, even of the smallest degree, was 73.

### **External Eye Disease.**

The following defects were found in the course of periodic medical inspection :—

<i>Blepharitis</i>	...	...	<i>54</i>	<i>Conjunctivitis</i>	...	<i>4</i>
				<i>Other defects</i>	...	<i>43</i>

### **Uncleanliness.**

See report on page 67.

### **Minor Ailments and Diseases of the Skin.**

The following skin diseases were recorded at the medical inspections :—

<i>Urticaria</i>	...	...	<i>25</i>	<i>Verrucae</i>	...	...	<i>24</i>
<i>Dermatitis</i>	...	...	<i>19</i>	<i>Epidermophytosis</i>	...	...	<i>27</i>
<i>Warts</i>	...	...	<i>37</i>	<i>Ichthyosis</i>	...	...	<i>8</i>
<i>Eczema</i>	...	...	<i>45</i>	<i>Psoriasis</i>	...	...	<i>10</i>
<i>Acne</i>	...	...	<i>43</i>	<i>Ringworm, Body</i>	...	...	<i>8</i>
<i>Nævus</i>	...	...	<i>33</i>	<i>Impetigo</i>	...	...	<i>15</i>
<i>Keloid</i>	...	...	<i>13</i>	<i>Other Diseases</i>	...	...	<i>107</i>
<i>Boils</i>	...	...	<i>8</i>				

### **Nose and Throat Defects.**

The number of children referred for treatment for enlarged tonsils and adenoids was 3.0 per cent. of the number examined. The percentage placed under observation was 5.4.

### **Ear Disease and Defective Hearing.**

131 children were noted as suffering from Otorrhœa at periodic medical inspection.

Defective hearing, mostly of a slight character, was found in 86 cases.

### **Dental Defects.**

939 children were found at the periodic medical inspection to have carious teeth.

### **Orthopaedic and Postural Defects.**

The following deformities were noted at the periodic medical inspections :—

Flat Feet	...	...	195	Spinal Curvature	...	169
				Other Defects	...	532

### **Heart Disease and Rheumatism.**

1.6 per cent. of all children examined were listed as having heart defects. Few of these were organic and the vast majority required only observation. The number of children found to be suffering from rheumatism was 16.

### **Tuberculosis.**

Two cases were referred from routine medical inspection to the Chest Physician for advice during the year. In addition, 4 "specials" were referred to the Chest Physician for opinion. 26 school children were notified as suffering from tuberculosis (all pulmonary) during the year.

### **Vaccination.**

1,041 (12.8 per cent.) of the 8,164 children medically inspected were recorded as having been vaccinated. The percentages in previous years were as follows :—

1938...	...	...	10.8	1952...	...	...	11.6
1945...	...	...	8.0	1953...	...	...	11.3
1948...	...	...	9.7	1954...	...	...	10.6
1950...	...	...	9.8	1955...	...	...	12.8

### **FOLLOWING UP.**

The arrangements for the following up of children suffering from the various defects continued as outlined in a previous report.

**ARRANGEMENTS FOR TREATMENT.****School Clinics.**

	Monday.		Tuesday.		Wednesday.		Thursday.		Friday.		Satur-day.
	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.
Central Clinic, Temple House ...	D. S. M.A. C.G. R.G.	D. S. C.G. R.G. S.	D. C.G. R.G. S.	D. M.A. C.G. S.	D. C.G. R.G. S.	D. S. M.A. C.G. R.G.	D. S. C.G. R.G. S.	D. C.G. R.G. S.	D. C.G. R.G. S.	D. C.G. M.A. C.G. R.G.	
<i>Branch Clinics.</i>											
Nightingale Road...				M.A.						M.A.	
Boulton ... ...	M.A.						M.A.				
Pear Tree School...			M.A.		M.A.				M.A.		
Rykneld ... ...			M.A.						M.A.		
Roe Farm ... ...	M.A.						M.A.		S.		
Green Street ...	U.V.R.		M.A.	U.V.R.			U.V.R.		M.A.	U.V.R.	

M.A. ... Minor Ailments Clinic.

S. ... Speech Clinic.

U.V.R. ... Ultra Violet Rays Clinic.

D.... ... Dental Clinic.

C.G. ... Child Guidance Clinic.

R.G. ... Remedial Gymnast's Class.

In addition, the following Regional Hospital Board clinics are held in the Central Clinic premises :—

Ophthalmic Clinic	...	...	Five sessions per week.
Orthopædic Clinic	...	...	One session per week.
Aural Clinic	...	...	One session per week.

**Consultation Clinic, Mill Hill Lane.**

783 attendances were made at this clinic during the year.

### Minor Ailments Clinics.

The total number of children attending these clinics was 4,333, and the number of attendances was 26,442. Of this number, 5,135 examinations (inspections and re-inspections) were made by Medical Officers.

The following is a record of the number of cases and attendances at the minor ailments clinics since 1931 :—

<i>Year.</i>	<i>No. of children attending.</i>			<i>Attendances.</i>
1931	...	...	...	11,470
1935	...	...	...	19,240
1938	...	...	...	19,224
1943	...	...	...	18,342
1945	...	...	...	16,810
1948	...	...	...	10,593
1950	...	...	...	11,323
1951	...	...	...	8,004
1952	...	...	...	5,552
1953	...	...	...	5,196
1954	...	...	...	5,347
1955	...	...	...	4,333

### Ultra-Violet Ray Clinic, Green Street.

Total number of children attended ...	...	...	161
Total number of attendances ...	...	...	2,394

In addition, 17 cases referred from the Child Welfare Clinic made 200 attendances. The types of cases treated were similar to the lists given in previous reports.

### Dental Clinic, Mill Hill Lane.

The Dental Clinic is held every day of the week (morning and afternoon).

Total number of cases attended	...	...	...	7,635
Total number of attendances ...	...	...	...	11,536
Total number of clinics held ...	...	...	...	1,354

### **Aural Clinic, Mill Hill Lane.**

The number of children who received operative treatment for tonsils and adenoids during 1955 was 134.

In addition, three children received operative treatment for ear conditions, and six for other conditions of the nose and throat.

Total number of cases attended	...	...	...	366
Total number of attendances ...	...	...	...	465

Included in these figures are four cases referred from Child Welfare Centres.

### **Orthopaedic Clinic, Mill Hill Lane.**

Total number of cases attended	...	...	...	663
Total number of attendances ...	...	...	...	905

Included in these figures are 96 cases referred from Child Welfare Centres.

Number of X-ray examinations (at City Hospital)...	66
Attendances at Splint Maker ...	317

### **Remedial Gymnast:**

Total number of attendances (at Central Clinic)	2,170
---	-------

### **AT ASHE HALL SPECIAL SCHOOL:—**

Number of children treated ...	...	...	...	52
Number of treatments given ...	...	...	...	1,421
Number of visits to School ...	...	...	...	107

### **Heart and Rheumatism Clinic, Mill Hill Lane.**

Number of children attended ...	...	...	...	9
Number of attendances ...	...	...	...	12

### **Ophthalmic Clinic, Mill Hill Lane.**

Total number of cases attended	...	...	...	2,212
Total number of attendances ...	...	...	...	3,863

### **Orthoptic Clinic.**

I am indebted to Mrs. C. Clemence, the Orthoptist in charge of the Department, for the following report:—

Number of cases dealt with during 1955 (including 14 new cases)	...	...	...	...	...	195
---	-----	-----	-----	-----	-----	-----

## CLASSIFICATION.

Under observation, on preliminary treatment, or actual treatment	...	...	...	...	...	168
Discharged	...	...	...	...	...	27
						— 195
Total number of attendances	...	...	...	...	...	644

During the year 7 cases received operative treatment.

## Speech Therapy Clinic.

Report by Miss M. L. Umpleby, Speech Therapist.

"The most important event in the Speech Therapy Department this year has been the acquisition of its own premises. We are most grateful for the many advantages that this affords, particularly the use of a large playroom. In time, when it has been decorated, water laid on, and rooms sound-proofed, we shall have an ideal clinic ; meanwhile we are most happy to feel that we are now such a big step nearer.

"It is pleasing to note that only two cases have had their treatment temporarily suspended owing to this centralisation of the Clinic. Apart from a passing grumble, mothers have all been co-operative in the cases where further travelling has been involved, and many have expressed the opinion that it is "much nicer" at the Mill Hill Lane Clinic.

"We were grateful for the opportunity to attend the Conference on Speech Therapy in London from June 26th—29th. It was found to be very helpful and stimulating.

"There has been one student from the Leicester School of Speech Therapy attending the Clinic this year, treating under supervision. Other visitors have included students from the Derby Training College.

"Roughly one session a week has been reserved again for school visiting this year, and interest and help from teachers has been encouraging. Co-operation in referring cases for Speech Therapy noticed in school has been very good.

"It is hoped that in the coming year the waiting list will continue to be a short one, and that the advantages of having our own premises will be

reflected both in higher attendance figures and in the number of cases discharged."

No. of cases on record	...	...	...	...	...	259
No. of cases seen and treated	...	...	...	...	...	245
No. of stammerers	...	...	...	...	53	
No. of speech defects	...	...	...	...	167	
No. of cleft palates	...	...	...	...	11	
No. of stammerers with speech defects	...	...	...	...	7	
No. of cerebral palsy	...	...	...	...	4	
No. of deaf	...	...	...	...	3	
No. discharged	...	...	...	...	...	65
Cured	...	...	...	...	46	
Left school—transferred to D.R.I.	...	...	...	...	1	
Excellent progress	...	...	...	...	3	
Satisfactory progress	...	...	...	...	3	
Lack of co-operation	...	...	...	...	9	
Low I.Q. Unsuitable for treatment	...	...	...	...	1	
Left district	...	...	...	...	2	
No. of cases under observation at the end of the year	...	...	...	...	...	151
No. of new cases admitted	...	...	...	...	...	97
No. on waiting list at the end of the year	...	...	...	...	...	10
No. of male patients	...	...	...	...	181	
No. of female patients	...	...	...	...	78	
No. of cases referred to specialist departments	...	...	...	...	...	17
No. of clinics held	...	...	...	...	...	537
No. of attendances	...	...	...	...	...	2,405

### Child Guidance Clinic.

Report by Dr. T. A. Ratcliffe, Psychiatrist.

"One of the important events during this year, in the field of Child Guidance work in this country, has been the publication by the Ministry of Education of the Report of the Committee on the Treatment of the Maladjusted Child. A study of that excellent Report—and it is to be hoped that every Education Authority will study it—will give a clear picture of the functions, responsibilities and staffing requirements of a good Child Guidance Clinic. It is interesting to note how closely the professional aims of this Authority's Child Guidance Clinic conform to the suggestions of that Report; and equally important to note how far below the ideal staffing requirements we fall in terms of available numbers and professional time. As I have stressed in previous reports, our work is still seriously limited by the absence of a Psychiatric Social Worker, and by the relatively little psychiatric time available. Indeed, if it were not for the very high professional standards maintained by my colleagues, Miss Broughton and Miss Gateley, and the very hard work which they put into the Clinic, our work could not

be continued at anything like its present good level. We are particularly grateful to Miss Gateley for the considerable study she has successfully carried through in her own time to gain Part 1 of the University of London Diploma in Social Studies; and grateful to the Authority for granting her special leave to complete the work for this Diploma. The acquisition of these new professional skills will be of great value in the work she does in this Clinic.

"The appended statistical tables of work done during the year show no really significant change. I am, however, glad to note a relative increase in the number of cases referred for "emotional (nervous) disturbance", since this indicates that children are being referred to us not so much because their symptoms have a "nuisance value" to school or parent, but rather because of underlying psychological disturbances. It is with help over these underlying emotional disturbances that a Clinic such as this can be of greatest value as a therapeutic and preventive mental health service."

### Statistical Tables.

NOTE 1.—The figures in these Tables refer only to the actual work done in the Child Guidance Clinic during 1955. Since there is always a considerable carry-over of case material under treatment and survey from one year to the next, it is inevitable that the totals given in the various Tables cannot tally with each other.

NOTE 2.—The corresponding figures for 1954 are given in brackets.

TABLE I. *Interviews carried out by Psychiatrist.*

New cases	...	...	...	...	...	...	...	52	(49)
Parents	...	...	...	...	...	...	...	158	(121)
Treatment interviews	...	...	...	...	...	...	...	93	(73)
Survey interviews	...	...	...	...	...	...	...	85	(71)
Others (Children's Officer, foster-parents, Probation Officer, etc.)	...	...	...	...	...	...	...	24	(18)

TABLE II. *Interviews by Educational Psychologist.*

Intelligence testing	...	...	...	...	...	...	...	106	(112)
School visits	...	...	...	...	...	...	...	152	(153)
Home visits	...	...	...	...	...	...	...	149	(187)
Play or interview sessions	...	...	...	...	...	...	...	85	(72)
Parents and others	...	...	...	...	...	...	...	291	(219)

The Psychologist spoke on the work of the Clinic to Normanton School Parent Teacher Association, and to Boulton Infant School Mothers' Club, to Students of the Derby Group working for the National Nursery Certificate, to Social Science Degree and Diploma Students of Nottingham University, to a student from Bath Training College and one from Watford College. We were also pleased to welcome Mr. and Mrs. Assal of the Egyptian Education Department, and Dr. Forrest of the Derby Children's Hospital.

TABLE III. *Interviews by Remedial Teacher (nine months).*

Remedial teaching	...	...	...	...	...	...	464	(721)
Home visits	...	...	...	...	...	...	193	(338)
Parents	...	...	...	...	...	...	33	(60)
School visits	...	...	...	...	...	...	13	(19)
Others	...	...	...	...	...	...	90	(217)

TABLE IV. *Recommendations Made.*

New cases referred to the Clinic during 1955	...	...	71	(79)
New cases remaining 31st December where full diagnostic interviews are still incomplete	...	...	16	(12)
Recommended for—Intensive treatment	...	...	6	(4)
Survey	...	...	29	(31)
Remedial teaching or play group	...	...	3	(15)
Diagnosis and initial advice only	...	...	6	(14)
Diagnosis and report only	...	...	4	(7)
Other disposals	...	...	7	(3)
Cases closed, including those referred for initial advice and report only	...	...	63	(83)

TABLE V. *Source of Referral.*

School Medical Service	...	...	...	...	...	21	(31)
Schools	...	...	...	...	...	8	(13)
Parents	...	...	...	...	...	5	(6)
Juvenile Court and Probation Officer	...	...	...	...	...	5	(1)
Speech Therapist	...	...	...	...	...	6	(6)
Children's Officer	...	...	...	...	...	9	(7)
St. Christopher's	...	...	...	...	...	2	(4)
General Practitioners	...	...	...	...	...	1	(7)
Hospital	...	...	...	...	...	11	(0)
School Welfare	...	...	...	...	...	2	(3)
N.S.P.C.C.	...	...	...	...	...	1	(0)

TABLE VI. *Distribution of Schools.*

Pre-school	...	...	...	...	...	...	...	4	(3)
Infants	...	...	...	...	...	...	...	14	(15)
Junior	...	...	...	...	...	...	...	25	(39)
Secondary Modern	...	...	...	...	...	...	...	21	(12)
Grammar	...	...	...	...	...	...	...	4	(5)
Not at school	...	...	...	...	...	...	...	3	(5)

TABLE VII. *Reasons for Referral.*

(NOTE: The large variety of individual reasons are here grouped for convenience into four arbitrary and overlapping categories.)

Educational problems	...	...	...	...	...	15	(28)
Behaviour problems	...	...	...	...	...	21	(24)
Emotional (nervous) problems	...	...	...	...	...	30	(27)
Other reasons	...	...	...	...	...	5	(0)

TABLE VIII. *State of Cases on Closure.*

(a) Completed—

Much improved	...	...	...	...	...	22	(31)
Improved	...	...	...	...	...	18	(20)
No change	...	...	...	...	...	5	(4)

(b) Diagnosis and initial advice only

...	...	...	...	8	(12)
-----	-----	-----	-----	---	------

(c) Diagnosis and report only

...	...	...	...	4	(7)
-----	-----	-----	-----	---	-----

(d) Cases closed for other reasons

...	...	...	...	6	(9)
-----	-----	-----	-----	---	-----

(These include children who have left school, or the area, before treatment was completed, or cases closed because of lack of co-operation.)

### PROVISION OF MEALS.

The number of children on the Free Meal List is 396.

### CO-OPERATION OF PARENTS.

The number of parents who attended with their children for periodic medical inspection, together with the figures available for previous years, was as follows:—

		Number.	Total Percentage.	Percentage in Infant Group.
1914	...	1,096	14.2	—
1924	...	1,464	24.8	—
1934	...	4,077	48.6	83.0
1938	...	3,783	54.0	80.0
1945	...	2,122	55.0	80.1
1947	...	3,859	48.3	73.4
1949	...	3,452	60.8	85.6
1951	...	3,488	60.3	87.0
1952	...	3,838	54.8	86.9
1953	...	5,371	63.2	87.0
1954	...	4,697	57.6	88.2
1955	...	4,821	59.0	88.1

**PUPILS REQUIRING EDUCATION AT SPECIAL SCHOOLS OR BOARDING IN BOARDING HOMES :—**

	<i>Blind</i>	<i>Partially Sighted</i>	<i>Deaf</i>	<i>Partially Deaf</i>	<i>Delicate</i>	<i>Physically Handicapped</i>	<i>Educationally Sub-normal</i>	<i>Mal-adjusted</i>	<i>Epileptic</i>	<i>Total</i>
In the calendar year :—										
A. Handicapped Pupils newly placed in Special Schools or Homes .. .. .. .. ..	—	1	—	—	31	1	24	—	1	58
B. Handicapped Pupils newly ascertained as requiring education at Special Schools or boarding in Homes .. .. .. ..	1	—	—	—	28	—	29	—	1	59
On 31st January, 1956.										
C. Number of Handicapped Pupils—										
(i) attending Special Schools as :—										
(a) Day Pupils .. .. .. ..	—	1	1	15	—	36	—	105	—	141
(b) Boarding Pupils .. .. .. ..	—	—	—	—	51	2	—	5	4	81
(ii) attending Independent Schools (under arrangements made by the Authority) .. .. .. ..	—	—	—	—	—	—	—	—	1	1
(iii) Boarded in Homes .. .. .. ..	—	—	—	—	—	—	—	—	—	—
Total (C) .. .. .. ..	—	1	1	1	15	1	87	2	110	1
D. Number of Handicapped Pupils being educated under arrangements made under Section 56 of the Education Act, 1944—										
(i) in hospitals .. .. .. ..	—	—	—	—	—	1	2	—	—	3
(ii) in other groups .. .. .. ..	—	—	—	—	—	—	—	—	1	3
(iii) at home .. .. .. ..	—	—	—	—	—	—	—	—	—	—
E. Number of Handicapped Pupils requiring places in Special Schools—										
(i) (a) Day .. .. .. ..	—	—	—	—	—	1	—	—	—	1
(b) Boarding .. .. .. ..	—	—	—	—	—	3	—	—	—	5
Number included in above—										
(ii) who had not reached the age of five										
(a) awaiting day places .. .. .. ..	—	—	—	—	—	—	—	—	—	—
(b) awaiting boarding places .. .. .. ..	—	1	—	—	—	—	—	—	—	1
(iii) who had reached the age of five but whose parents had not consented to their admission to a special school										
(a) awaiting day places .. .. .. ..	—	—	—	—	—	—	—	—	—	1
(b) awaiting boarding places .. .. .. ..	—	—	—	—	—	—	—	2	—	3

### **Educationally Subnormal.**

Notified under Section 57 (3), Education Act, 1944	...	...	7
Notified under Section 57 (4), Education Act, 1944	...	...	Nil
Notified under Section 57 (5), Education Act, 1944	...	...	12

### **Temple House Special School for Educationally Subnormal Pupils.**

During 1955, 44 children were referred for examination or reviewed regarding their admission to the school. Of these, 27 were certified as capable of receiving benefit from instruction in the Special School. The remaining 17 children, after examination, were retained in the elementary school.

24 children were admitted to the Special School during the year (this figure includes three children referred for examination in 1954). Six children referred for examination in 1955 were admitted early in 1956.

The following is a report by Mr. F. G. Smith, Headmaster.

"I did not take up my duties at Temple House until the 1st December, 1955. The School has unfortunately laboured for long periods under the handicap of shortage of staff, a handicap which is serious enough in the Primary and Secondary Schools, but very much more serious in this type of school where stability, consistency and serenity are of such increased importance to the pupils.

"A very happy atmosphere prevails in this School situated in old premises which possess all the disadvantages and most of the advantages inherent in large family mansions. During the year 24 children were admitted to the School and 23 left. Of the leavers,

- 5 were excluded as ineducable.
- 3 left the town.
- 2 returned to normal school.
- 2 were placed on the Suspense Register.
- 12 left at sixteen years of age to go to work.

"Of the seven girls going to work, two obtained employment in a factory, two found work in bakeries, two in laundries, and the last one became a domestic worker in a hospital. All are apparently doing very well, though four of the seven have changed their employment.

"Of the five boys, two became van-boys, one found employment in a dairy and one is a warehouse boy; all are at the present time working satisfactorily. The remaining boy left the town.

"I would like to express my thanks for the friendly co-operation and assistance which I have received from all the ancillary services on the same site as the School, and from the various departments of the Education Authority."

### **Class for the Partially Sighted.**

Report by Miss M. Copley, teacher in charge.

"During the year there were ten pupils in the class. One girl left at the age of sixteen and four children, aged from five to eight years, were admitted. The class consisted of two fifteen year olds, one aged eleven, and the rest from five to nine years old.

"The year has been a period of adjustment from a dominantly older, responsible class to one which included a relatively large infant element. It has been a difficult but fine opportunity to teach the practice of tolerance in a community of widely varying needs and interests. The character of the class is completely different from that of a year ago.

"Teaching approaches and methods have had to be adapted to attract and hold the maximum interest of a wide range of ability. New apparatus suitable for younger children has had to be selected and acquired.

"The teaching of basic skills has proceeded more slowly because of the number of children at different stages needing individual help. The number of subjects taught has been reduced because more time has had to be given to social training. For example, care of their own spectacles and respect for each others' has needed unremitting supervision. More time has been given to speech training and dramatisation ; not only to develop intelligible speech but to give opportunities of working together as a team. For this latter reason, group projects in handwork have also been worked out. Use of broadcast lessons has been suspended temporarily, as the class as a whole is not yet mentally or emotionally ready to listen profitably. One girl has attended housecraft classes and done well, while one boy has begun wood-work.

"An Open Day exhibition was held in September and attracted a large number of visitors. Just before Christmas, mothers paid their annual visit to sing carols with their children and to watch simple plays performed by them. This afternoon was also the occasion of a surprise visit by Dr. Fleming, H.M.I. Among other visitors during the year were Mr. Assal, a Government Inspector of Schools in Egypt, and his wife, the Headmistress of a girls' school.

"In September the whole class—even the five year old—had a day's outing. This was made possible by the co-operation of a capable mother and another teacher. At Bakewell we joined a partially sighted class from Sheffield with their teacher and his wife. The older children of the combined classes walked to Over Haddon and right through Lathkill Dale, while the younger ones were taken by bus and had a short ramble in the dale.

"At Christmas the children sang and performed plays to entertain members of the Blind Welfare Department, who had brought them a party tea, and gifts from the Mayor.

"Former pupils continue to contact the teacher by letter, phone call and visit. Though this work often seems non-productive during school years, there is encouraging evidence that these visually handicapped children become good citizens."

### **Ashe Hall Special School for Delicate Pupils.**

Miss M. E. Curtis, Headmistress, reports as follows:—

"The School continues along the usual lines. The average numbers during the past twelve months have been somewhat lower, but have now built up again to the usual 100+.

"From time to time we wonder why there are so many fragile children. Some come from excellent homes, and their lack of health is not easily explained. But there is a large hard core of families where ill-health has been the rule. More than ten per cent. of the children who have passed through Ashe Hall have lost one or both parents during childhood. Another five per cent. or more have one parent who is a permanent or semi-invalid. The incidence of deaths, illnesses and operations among their close relatives is certainly greater than average. Some parents appear quite worn out with the strain of their own illness and the worry of illness and short wages of other members of the family. It is good for delicate children to escape from the atmosphere engendered by this kind of despair. Some of our children whom I have visited come from large families still to-day living in bad and overcrowded conditions. Too early and ill-considered marriages and a view of matrimony divorced from home-making is another of the social evils resulting in puny children.

"A gratifying sign which is very noticeable to-day at the beginning of the sixth year is the solid backing of parents. It is a pleasure to talk to parents so appreciative of the benefits of Ashe Hall.

"The children's general air of well-being after even a fortnight at Ashe Hall is noticeable to their parents. Weight gains have been especially good this year. Appetites generally are very good indeed. A healthy attitude to life is encouraged (eat well, sleep well, work well, have fun and keep cheerful).

"Another rewarding feature is the growing number of old pupils who are a credit to the School, settle in steady employment and come out to visit the School. There is occasionally a child of sixteen who is unfit for daily work and needs special care, but this is rare. There is a growing minority of leavers who have a desire to live and work in the country. One is planning to take a course leading to stock farming. Another has returned to the country after two years, and has taken a job as dairymaid and poultry girl on a farm. This seems a wise trend.

"Lack of health and schooling does result in our receiving children, many of whom are greatly lacking in personality and initiative. Some are children who could easily become unemployable from sheer lack of spirit. Given time and encouragement much can be done, and we can point to one or two such children who have found their feet and will be useful citizens in adult life.

"A solid school spirit makes it possible to absorb homesick children and odd and maladjusted ones. The children excel in kindness to each other and do for us all that which is necessary in helping new children to settle easily.

"Guides, Cubs and Brownies still flourish. On the educational side—many of the older children have been discharged and we have just taken in a large group of children in the 5—9 years age range, most of whom will have to learn their letters. We are, of course, prepared for this sort of thing—but it means that on the whole the children we turn out are practical rather than intellectual. We are trying out a metal work class with a few senior boys this term."

#### **Full-time Courses of Higher Education for Blind, Deaf, Defective and Epileptic Students.**

There are no centres for Higher Education or Vocational Training in Derby. Suitable cases requiring such training are sent to recognised institutions elsewhere.

## TEACHING IN HOSPITALS.

The following report has been received from Miss M. Turner, who is in the service of the Local Education Authority, and who undertakes the teaching of children of school age in the local hospitals:—

“126 Borough school children have received individual tuition during 1955 as follows:—

		<i>City Hospital.</i>	<i>Children's Hospital.</i>	<i>Derwent Hospital.</i>
Number of children	...	58	66	2
Average period of tuition	...	2—4 weeks.	2—5 weeks.	9 weeks.
Average age	...	9 yrs. 7 mths.	9 yrs.	14 years.
Age range	...	5—13 years.	5—13 years.	14—15 years.
Period range	...	1—7 weeks.	1—16 weeks.	6—12 weeks.

“In addition to individual lessons in Arithmetic, Reading, English, French, and Handwork, group lessons have been given whenever circumstances permitted, in Scripture, History, Geography and Nature Study.”

## NURSERY SCHOOLS.

The three Nursery Schools (Central, Allenton and College) continue to function successfully on the lines indicated in previous reports. The children are visited regularly by the School Nurse and at frequent intervals by the Medical Officer. Every child is medically examined at least once per year and treatment inaugurated for any defects.

The number of children examined at the various schools was:—

<i>School.</i>		<i>Bcys.</i>	<i>Girls.</i>	<i>Total.</i>
Central	...	41	36	77
Allenton	...	15	20	35
College	...	30	27	57
<b>Totals</b>	...	<b>86</b>	<b>83</b>	<b>169</b>

## EMPLOYMENT OF SCHOOL CHILDREN.

During the year, 385 children were examined as to their fitness to undertake employment. All were certified fit.

### THE WORK OF THE SCHOOL NURSES.

Seven nurses are engaged entirely on the work of the School Health Services, two of them part-time. In addition, four nurses are employed on half-time Health and half-time School Health Services.

Home visits	...	...	...	...	...	1,401
School visits	...	...	...	...	...	213

### Visits to Nursery Schools.

Number of visits paid	...	...	...	...	318
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### Clinics.

Clinics.	Sessions.
Minor Ailments, Specialist Clinics and Ultra Violet Ray Clinics	2,082

### VERMINOUS CONDITIONS.

Routine Inspections of all children for the ascertainment of uncleanliness are carried out in schools twice a year by the Authority's Cleansing Attendants. In addition, frequent visits to schools for re-inspection of children listed as infested at previous inspections are made. All children who are found to be infested with lice or who appear to be seriously infested with nits, and those showing fewer nits but appearing to be neglected, are listed for cleansing. The parents of those children who require cleansing are immediately served with a notice requiring them to present the children at the cleansing centre. Children found at subsequent inspections to be re-infested are again required to attend for cleansing, and the parents are warned that, in the event of a recurrence, court proceedings will be instituted. Proceedings were taken in 40 such cases in 1955. Parents of those children who are slightly infested receive a notice notifying them of the condition of the child's head and instructions with regard to cleansing. These children are then kept under periodic review until found to be clean.

Number of individual children cleansed	...	...	279
Number of sessions devoted to School Inspections	...	...	521

### CHILDREN'S COMMITTEE WORK.

Special examinations of children committed to the care of the Local Authority are carried out by the medical staff of the School Health Service, and routine visits to the various Children's Homes are made monthly, and to the Remand Home once a week.

The following examinations were carried out during the year :—

Initial and routine examinations of Boarded-out children	90
Children for adoption ... ... ... ... ...	8
Examinations carried out at Children's Homes ... ...	62
Children for Approved Schools or Remand Homes (including examinations carried out at Remand Homes)	200
Other Examinations ... ... ... ... ...	4

### MISCELLANEOUS WORK.

Medical examinations were also made as follows :—

Teachers ... ... ... ... ...	25
Before proceeding to Skegness Seaside Home ... ...	419
Before taking part in entertainments ... ...	11
Before taking part in School Journeys, Athletics, etc...	317
Before proceeding to School Camps ... ...	264
Intending Teachers ... ... ... ...	44
Before returning to Special Schools ... ...	2

### MASS RADIOGRAPHY OF SCHOOL CHILDREN.

Report by Dr. W. Guthrie, Director of Nottingham Area No. 2 Mass Radiography Unit, on the Mass Radiography Survey of school children, July, 1955.

#### Miniature Films.

	Number X-rayed.			Number available.			% X-rayed.		
	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.
Over 13 years ...	2,089 (565)	1,982 (501)	4,071 (1,066)	2,773	2,577	5,350	75 (27)	76 (25)	76 (26)
Under 13 years...	7	2	9						
Total ...	2,096	1,984	4,080						

The figures in brackets show the numbers and percentages of children who had been previously X-rayed by the Mass Radiography Unit.

"As usual, there was a good response on the part of the school children, but the percentage who came for X-ray, i.e. 76%, was lower than last year, when it was 80%.

"The increased number X-rayed is due to the fact that this year children of 13 years of age and over were asked to come for X-ray, whereas previously we have only X-rayed children of 14 years and over."

## APPENDIX.

**TABLE I.—MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS.  
(INCLUDING SPECIAL SCHOOLS).**

## A.—PERIODIC MEDICAL INSPECTIONS.

Age Groups inspected and Number of Children examined in each :—					
Up to and including 5 years	...	...	...	...	2,226
10 years	...	...	...	...	1,907
14 years	...	...	...	...	1,525
			Total	...	5,658
Additional Periodic Inspections	...	...	...	...	2,506
			Grand Total	...	8,164

## B.—OTHER INSPECTIONS.

Number of Special Inspections	...	...	...	...	2,699
Number of Re-Inspections	...	...	...	...	11,473
			Total	...	14,172

## C.—PUPILS FOUND TO REQUIRE TREATMENT.

NUMBER OF INDIVIDUAL PUPILS FOUND AT PERIODIC MEDICAL INSPECTION  
TO REQUIRE TREATMENT  
(excluding Dental Diseases and Infestation with Vermin).

GROUP.	<i>For defective vision (excluding squint).</i>	<i>For any of the other conditions recorded in Table II A.</i>	<i>Total individual pupils.</i>
Up to and including 5 years ..	12	440	449
10 years .. ..	192	308	468
14 years .. .. ..	188	179	354
Total .. .. ..	392	927	1,271
Additional Periodic Inspections ..	283	385	637
<b>GRAND TOTAL .. .. ..</b>	<b>675</b>	<b>1,312</b>	<b>1,908</b>

TABLE II.

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31ST DECEMBER, 1955.

DEFECT OR DISEASE.	PERIODIC INSPECTIONS.		SPECIAL INSPECTIONS.	
	No. of defects.		No. of defects.	
	Requiring treatment.	Requiring to be kept under observation, but not requiring treatment.	Requiring treatment.	Requiring to be kept under observation, but not requiring treatment.
Skin ... ... ...	227	195	2,727	270
Eyes— <i>a.</i> Vision ... ...	675	182	1,598	675
<i>b.</i> Squint ... ...	223	39	393	77
<i>c.</i> Other ... ...	56	45	756	68
Ears— <i>a.</i> Hearing...	24	62	48	85
<i>b.</i> Otitis Media ...	46	85	142	160
<i>c.</i> Other ... ...	48	43	210	121
Nose or Throat ... ... ...	289	576	705	1,012
Speech ... ... ...	49	116	161	146
Cervical Glands ... ... ...	16	227	47	418
Heart and Circulation ...	13	125	16	162
Lungs ... ... ...	88	285	129	533
Developmental—				
<i>a.</i> Hernia ... ...	10	20	15	72
<i>b.</i> Other ... ...	29	112	28	84
Orthopaedic—				
<i>a.</i> Posture ...	66	103	52	101
<i>b.</i> Flat foot ...	87	108	284	153
<i>c.</i> Other ... ...	157	375	331	378
Nervous system—				
<i>a.</i> Epilepsy ...	21	8	27	12
<i>b.</i> Other ... ...	10	61	20	103
Psychological—				
<i>a.</i> Development ...	2	36	1	69
<i>b.</i> Stability ...	12	21	47	62
Other ... ... ...	137	454	6,361	1,159

B.—CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS  
INSPECTED DURING THE YEAR IN THE AGE GROUPS.

Age Groups.	Number of Pupils Inspected.	A. (Good).		B. (Fair).		C. (Poor).	
		No.	%	No.	%	No.	%
Up to and including 5 years ..	2,226	1,064	47.80	1,157	51.98	5	0.22
10 years .. ..	1,907	881	46.20	1,024	53.70	2	0.10
14 years .. ..	1,525	804	52.72	718	47.08	3	0.20
Additional Periodic Inspections..	2,506	1,240	49.48	1,240	49.48	26	1.04
Total .. ..	8,164	3,989	48.86	4,139	50.70	36	0.44

TABLE III.  
INFESTATION WITH VERMIN.

(i) Total number of examinations in the schools by the school nurses or other authorised persons	...	...	...	...	48,941
(ii) Total number of <i>individual</i> pupils found to be infested	..				527
(iii) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	...	...			279
(iv) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	...	...			279

TABLE IV.  
TREATMENT TABLES.

GROUP I.—DISEASES OF THE SKIN (excluding Uncleanliness, for which see Table III).

		Number of cases treated, or under treatment during the year.	
		By the Authority.	Otherwise.
Ringworm—			
(i) Scalp	...	...	2
(ii) Body	...	17	7
Scabies ..	...	15	5
Impetigo ..	...	318	34
Other skin diseases ..	...	2,064	266
<b>TOTAL</b>	...	<b>2,414</b>	<b>314</b>

## GROUP II.—EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	Number of cases dealt with	
	By the Authority.	Otherwise.
External and other, excluding errors of refraction and squint ... ...	636	125
Errors of refraction (including squint) ...	—	1,819
Total ... ...	636	1,944
Number of pupils for whom spectacles were		
(a) Prescribed ... ... ...	—	1,683
(b) Obtained... ... ... ...	—	1,616

## GROUP III.—DISEASES AND DEFECTS OF EAR, NOSE and THROAT.

	Number of cases treated	
	By the Authority.	Otherwise.
Received operative treatment		
(a) For diseases of the ear ... ...	—	3
(b) For adenoids and chronic tonsillitis...	—	134
(c) For other nose and throat conditions...	—	6
Received other forms of treatment ... ...	190	275
Total ... ...	190	418

## GROUP IV.—ORTHOPAEDIC AND POSTURAL DEFECTS.

(a) Number treated as in-patients in hospitals...	35	
(b) Number treated otherwise, e.g., in clinics or out-patient departments ... ...	By the Authority.	Otherwise.

## GROUP V.—CHILD GUIDANCE TREATMENT.

	Number of cases treated	
	In the Authority's Child Guidance Clinics.	Elsewhere.
Number of pupils treated at Child Guidance Clinics ... ... ... ...	258	—

## GROUP VI.—SPEECH THERAPY.

Number of pupils treated by Speech Therapists	Number of cases treated	
	By the Authority.	Otherwise.
	245	—

## GROUP VII.—OTHER TREATMENT GIVEN.

	Number of cases treated	
	By the Authority.	Otherwise.
Miscellaneous minor ailments .. ..	4,959	398
Ultra-violet Rays (excluding Open Air and Nursery Schools children) .. ..	59	—
Orthoptic .. .. .. .. ..	—	195 (includes 7 cases who received operative treatment)
Total .. ..	5,018	593

TABLE V.

## **DENTAL INSPECTION AND TREATMENT.**

(1)	Number of Pupils inspected by the Authority's Dental Officers—						
	(a) Periodic age groups	..	..	..	..	..	11,665
	(b) Specials	..	..	..	..	..	3,333
	(c) TOTAL (Periodic and Specials)	..	..	..	..	..	14,998
(2)	Number found to require treatment	..	..	..	..	..	10,651
(3)	Number referred for treatment	..	..	..	..	..	9,245
(4)	Number actually treated	..	..	..	..	..	7,635
(5)	Attendances made by Pupils for treatment	..	..	..	..	..	11,536
(6)	Half-days devoted to :	Inspection	..	..	..	..	83
		Treatment	..	..	..	..	1,354
		Total (6)		..	..	..	1,437
(7)	Fillings :	Permanent Teeth	..	..	..	..	5,317
		Temporary Teeth	..	..	..	..	—
		Total (7)		..	..	..	5,317
(8)	Number of teeth filled :	Permanent Teeth	..	..	..	..	4,730
		Temporary Teeth	..	..	..	..	—
		Total (8)		..	..	..	4,730
(9)	Extractions :	Permanent Teeth	..	..	..	..	2,557
		Temporary Teeth	..	..	..	..	10,482
		Total (9)		..	..	..	13,039
(10)	Administration of general anaesthetics for extraction	..	..	..	..	..	6,198
(11)	Other Operations :	Permanent Teeth	..	..	..	..	1,096
		Temporary Teeth	..	..	..	..	1
		Total (11)		..	..	..	1,097

## V—PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

### Vaccination during 1955.

Age at Date of Vaccination...	Under 1 year.		1 year.		2—4 years.		5—14 years.		15 years or over.		Total.	
	Dept	G.P's	Dept	G.P's	Dept	G.P's	Dept	G.P's	Dept	G.P's	Dept	G.P's
<b>PRIMARY VACCINATIONS.</b>												
<i>Result of Inspection.</i>												
Typical Primary Vaccinia—												
Seventh—Tenth Day ...	345	119	2	12	—	16	—	19	—	38	347	204
Accelerated (Vaccinoid) Reaction—												
Fifth—Seventh Day ...	—	—	—	—	—	—	—	—	—	—	—	—
Maximum Local Reaction—												
Second—Third Day ...	2	—	—	—	—	—	—	—	—	1	2	1
No Local Reaction	...	5	1	—	—	—	—	—	—	—	5	1
<b>TOTALS</b> ...	352	120	2	12	—	16	—	19	—	39	354	206

### RE-VACCINATIONS.

<i>Result of Inspection.</i>												
Typical Primary Vaccinia—												
Seventh—Tenth Day ...	—	—	—	—	1	—	—	1	—	11	1	12
Accelerated (Vaccinoid) Reaction—												
Fifth—Seventh Day ...	—	—	—	—	—	2	—	1	—	8	—	11
Maximum Local Reaction—												
Second—Third Day ...	—	—	—	—	—	—	—	—	2	10	2	10
No Local Reaction	...	—	—	—	—	—	—	1	—	1	—	2
<b>TOTALS</b> ...	—	—	—	—	—	1	2	—	3	2	30	35

The number of children under five years vaccinated during the year was 502 as compared with 529 in 1954.

The percentage of infants under the age of one year who were vaccinated was 23.

### B.C.G. Vaccination.

Public realisation of the value of B.C.G. vaccination against tuberculosis has increased enormously since a start was made towards the end of 1954. 231 children were Mantoux tested and 195 found to be Mantoux negative and these were given B.C.G. vaccination.

As the year progressed, greater numbers were requesting B.C.G. vaccination.

## Diphtheria and Whooping Cough Prophylaxis.

During the year combined immunisation and reinforcement immunisation against whooping cough was extended to school children. Parents responded and there was a greater demand for whooping cough than for diphtheria immunisation.

Clinics have been held at the Central Office, Child Welfare Centres, Day Nurseries, Primary and Junior Schools.

Number of sessions held	...	...	...	...	280
Average attendance per session	...	...	...	...	17

**IMMUNISATION BY THE DEPARTMENT:** 1,065 children under five years of age and 150 between five and fourteen years of age were completely immunised against diphtheria. A further 484 were given single doses to reinforce their immunity.

1,062 children under five years and 349 between five and fourteen years were completely immunised against whooping cough.

**IMMUNISATION BY PRIVATE PRACTITIONERS:** 314 children under five years and nine between five and fourteen years were completely immunised against diphtheria. A further 42 received single reinforcing doses.

257 children under five years and six between five and fourteen years were completely immunised against whooping cough.

Number of Children at 31st December, 1955, who had completed a course of immunisation AT ANY TIME BEFORE THAT DATE (i.e. at any time since 1st January, 1941).

Age at 31/12/55	...	...	Under 1	1- 4	5- 9	10- 14	Under 15
i.e. Born in Year	...	...	1955	1954- 1951	1950- 1946	1945- 1941	TOTAL
Last Complete Course of Injections (whether Primary or Booster)—							
A. 1951-1955...	...	...	276	4,857	6,171	2,326	13,630
B. 1950 or Earlier	...	...	—	—	2,051	6,480	8,531
C. Estimated Mid-year Child Population	...	...	1,990	7,410	20,000		29.4%
IMMUNITY INDEX. 100 A/0....			13.8%	65.5%		42.4%	46.3%

## Cases of Infectious Disease Notified during 1955

NOTIFIABLE DISEASE.	CASES NOTIFIED IN WHOLE DISTRICT.										TOTAL CASES NOTIFIED IN EACH WARD.																					
	At Ages—Years.					At All Ages					DeWolfe.					Fitzar Gate.					Kings Mead.											
Under 1.	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-25	25-35	35-45	45-65	65 and upwards.	Abbey.	Alvaston.	Arboretum.	Babington.	Becket.	Bridge.	Castles.	Dale.	Deane.	Dale.	Derwent.	Grange.	Litchurch.	Normanton.	Osmaston.	Pear Tree.	Rowdeth.	Non-Residents.	Total Cases removed to Isolation Hospital	
Scarlet Fever ..	68	2	3	8	9	36	4	3	2	1	..	..	5	5	4	..	2	2	2	2	2	2	2	15	13	..	1	4	8	1	4	..
Whooping Cough ..	248	26	22	30	39	85	9	..	..	..	..	..	8	23	3	7	5	9	8	3	25	35	14	13	12	74	3	6	..	9	..	
Diphtheria (including Membranous Group) ..	3948	128	487	554	569	611	1552	30	5	7	3	1	..	201	224	188	130	132	156	127	145	371	866	162	165	281	454	194	151	1	..	83
Measles ..	93	6	4	2	2	3	11	..	..	..	..	..	17	4	14	4	7	1	2	4	3	..	6	10	7	9	5	3	4	10	..	10
Acute Pneumonia ..	6	2	2	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Meningococcal Infection ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Acute Poliomyelitis—	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Paralytic ..	10	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Non-paralytic ..	10	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Acute Encephalitis—	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Infective ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Post-infectious ..	25	2	4	2	2	..	..	..	6	4	..	..	2	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Dysentery ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Ophthalmia Neonatorum ..	2	2	..	..	..	..	..	..	..	..	..	..	..	5	23	21	2	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..
Puerperal Pyrexia ..	51	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Smallpox ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Para-typoid Fevers ..	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Typhoid Fever ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Erysipelas ..	18	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Malaria ..	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Respiratory Tuberculosis ..	119	3	..	..	..	..	..	..	..	..	..	..	..	6	6	14	11	21	24	27	3	9	11	10	12	5	2	6	6	6	..	
Non-Respiratory	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Tuberculosis ..	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Food Poisoning ..	14	3	1	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
*Rubella ..	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
*Chicken Pox ..	24	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
*Leptospirosis ..	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
TOTALS ..	4655	173	522	604	624	670	1716	65	33	51	64	39	69	25	237	291	215	163	148	175	156	167	450	951	194	209	314	570	209	180	26	178

\*—Not compulsorily notifiable.

## COMMUNICABLE DISEASES.

### **Scarlet Fever.**

The number of notifications continues to decline. Only 68 cases were notified in 1955, compared with 106 in 1954 and 141 in 1953. The majority were mild and only 14 cases were removed to hospital.

### **Whooping Cough.**

There was a decline in the number of notifications. 248 cases were notified during the year, compared with 499 in 1954.

### **Diphtheria.**

No cases of diphtheria were reported.

### **Measles.**

The regular biennial increase of measles occurred and 3,948 cases were reported between 1st January and 19th December. One death occurred (a male child, aged one year). Of these cases, 3,431 were visited.

### **Acute Pneumonia.**

90 cases of acute primary pneumonia and 3 cases of influenzal pneumonia were notified. 46 of these cases were visited. The remainder were hospital cases.

### **Meningococcal Meningitis.**

6 cases came to the notice of the Department. No carriers were found among the family contacts.

### **Acute Poliomyelitis.**

22 cases of acute poliomyelitis were notified. 10 of these were paralytic. One death was reported. Two cases thought to be suffering from poliomyelitis proved otherwise; one had a cerebellar tumour and the other a transverse myelitis. The other cases cropped up sporadically in no particular epidemiological pattern, except in one instance where two cases occurred in one family. In those cases suffering paralysis, the severity was greater than usual.

### **Acute Encephalitis.**

1 case of infective encephalitis was reported.

### **Dysentery.**

25 sporadic cases were notified during the year. Of these, 23 were Sonnei dysentery, 1 Flexner dysentery, and 2 were not confirmed bacteriologically. One case remained a carrier. This man was working in food handling premises and voluntarily changed his employment.

### **Leptospirosis.**

This disease is not compulsorily notifiable, so cases are brought to the notice of the Health Department only by the courtesy of their practitioners or by reading the daily report from the Derwent Isolation Hospital. During the first two weeks of August, three cases occurred and were spotted in this way. Subsequently it was discovered that other cases had occurred but had not been admitted to the Derwent Hospital.

Intensive investigations were carried out, and the common factor was found to be that the children had paddled in a paddling pool in a public park. A detailed field survey was undertaken and it was discovered that all the water-courses were exceptionally low from the long period of drought and the unusually hot summer. This exposed a periphery of mud varying in width from six inches to as many feet. The water was heavily polluted by sewage, and, in the case of the paddling pool, marsh gas was seen bubbling to the surface. Samples of water taken from the paddling pool and adjacent brook were examined bacteriologically, and both were found to be potentially dangerous to health. Furthermore, the whole area was found to be heavily rodent infested.

The rodent infestation was found to be of two types. A colony of common water voles was found inhabiting the islands in the centre of the boating lake, and several large colonies of common brown rats were found round the adjacent waterways and paddling pool. No overlap of the two species was found.

The habit of the water voles was to stay on their islands during the day, swimming over to the bank at dusk to collect up scraps of food left by anglers. The rats were found nesting deep in the banks of the brook courses and in the hedge bottom beside the paddling pool, which they visited at night to drink.

There was ample evidence that, contrary to the rules of the Parks Department, boats were visiting the islands and picnics taking place there, and use was being made of the shrubbery as a substitute for the toilet accommodation.

Rodents of both species were trapped and examined for leptospirosis. Serum agglutination tests showed the voles to be unaffected but the rats to be carriers of the disease.

The whole area involved was immediately closed to the public and the paddling pool was drained and cleaned. Intensive rat extermination measures

were carried out, using zinc phosphide and a warfarin follow-up. This was highly successful. In view of the structure of the paddling pool being such that self-cleansing could not take place, and the only available source of water supply being sewage contaminated, the pool has been kept closed since.

In the course of the investigation it was discovered that the paddling pool at a nearby school was being visited periodically by rats. This pool has not been refilled or used since.

Because of the risk of rat-borne disease the policy was adopted to close all children's paddling pools in the Borough.

No further cases of leptospirosis came to the notice of the Health Department.

Difficulties were met in dealing with this disease because it is not always brought to the notice of the Health Department. As useful control measures can be applied, it is highly desirable that it should be made notifiable.

### **Enteric Fever.**

There was a small outbreak of paratyphoid B fever during the end of August and beginning of September, affecting four persons, three children and one girl of nineteen. In three of these cases the causative organism was isolated and found to be *Salmonella paratyphi B* phage type 3a. In the other case the diagnosis was not confirmed bacteriologically. The progress of the disease in each case was uneventful. All recovered, although one, a child of two and a half, remained a carrier.

The suspected vehicle of spread of the disease was thought to be meat pies directly contaminated with Chinese frozen egg. Although samples of the frozen egg proved negative bacteriologically, it is interesting to note that the phage type of the local cases was the same as that found in incriminated batches of contaminated Chinese frozen egg discovered in other parts of the country.

The managements of various firms concerned consulted the Health Department for advice on the use of frozen egg and egg products. Some useful improvements in the technique of handling these products were suggested and were willingly carried out. Advice on the avoidance of accidental contamination in the processing of these foods was also generally acted upon with a resulting improved standard of hygiene.

The persons working in the firms from where the outbreak was thought to have arisen, and who were food handlers, were examined. Serum agglutination reactions for *Salmonella paratyphi B* were carried out in the first

instance. Faeces were examined for the organism in those cases where the agglutination organism was found to be positive.

At one firm, ninety persons were examined. Of these, three complained of diarrhoea and seventeen had positive serum agglutination. No paratyphoid organisms were isolated from the stools. Three persons were temporarily suspended from work on a voluntary basis. One of these eventually gave up food handling to seek other employment.

At another firm, twelve persons were examined. None had symptoms and seven were found to have positive serum agglutination. No paratyphoid organisms were isolated from the stools. One of these positive reactors suspended herself from work temporarily.

It seemed likely that, in each of the two firms, multiple sub-clinical infections had occurred in the small closed community of the place of work. Started from a contaminated batch of frozen egg, it was kept up by cross infection between persons. Eventually spill-over into the town took place probably via infected meat pies and the outbreak of clinical paratyphoid B arose.

### **Erysipelas.**

Eighteen cases were reported during the year.

### **Food Poisoning.**

Fourteen sporadic cases of bacterial food poisoning were notified throughout the year. In isolated cases it was usually found that the notification came in too late to enable detection of the offending article of food to be carried out effectively. In November, a small outbreak of five related cases occurred and prompt notification enabled the offending foodstuff to be identified and any further spread of the outbreak to be prevented. The offending article was corned beef which had been contaminated by pathogenic staphylococci. Two cases which had not been notified came to the notice of the Department; it is probable that many more cases must have occurred of which the Health Department knew nothing. As useful preventive measures can be carried out, it is desirable that all cases of food poisoning or suspected food poisoning should be notified promptly, preferably by telephone, rather than by waiting for the post.

### Ophthalmia Neonatorum.

Cases notified—two (one male and one female).

Cases.						
Notified.	Treated.		Vision unimpaired.	Vision impaired.	Total Blindness.	Deaths
	At Home.	In Borough Hospitals.				
2	1	†1	2	—	—	—

†—In-patients of Nightingale Maternity Home.

The number of cases notified was one less than in 1954.

### Tuberculosis.

The Nottingham Mass Miniature Radiography Unit visited Derby five times during the year. Dr. Guthrie, the Director of the Unit, has kindly supplied the following figures. In all, 22,204 examinations were carried out on Derby residents, and of these eleven were found to be active cases of tuberculosis and twenty-two inactive.

The overall incidence, therefore, by these surveys was 0.5 per thousand active and 1.0 per thousand inactive.

## DERWENT AND DRAYCOTT HOSPITALS.

## Detailed Analysis of Admissions and Discharges during 1955 (Borough only).

Disease.	Remaining 31/12/54.	Admitted.	Discharged.	Dead.	Remaining 31/12/55.
Scarlet Fever .. .. ..	2	14	15	—	1
Measles .. .. ..	6	83	88	1	—
Poliomyelitis—					
Paralytic .. .. ..	1	11	8	1	3
Non-Paralytic .. .. ..	—	10	10	—	—
Food Poisoning .. .. ..	1	11	12	—	—
Chicken Pox .. .. ..	—	10	7	—	3
Cerebro-spinal Fever .. .. ..	1	1	2	—	—
Gastro-Enteritis .. .. ..	4	26	30	—	—
Enteritis .. .. ..	—	6	5	—	1
Influenza .. .. ..	—	5	5	—	—
Influenza Meningitis .. .. ..	1	—	1	—	—
Trigeminal Herpes .. .. ..	1	—	1	—	—
Erysipelas .. .. ..	—	4	4	—	—
Mumps .. .. ..	—	3	3	—	—
Bronchitis .. .. ..	—	4	4	—	—
Glandular Fever .. .. ..	—	7	6	—	1
Lymph/Meningitis .. .. ..	—	1	1	—	—
Tonsillitis .. .. ..	—	12	12	—	—
Catarrh .. .. ..	—	2	2	—	—
Whooping Cough .. .. ..	1	9	10	—	—
Impetigo .. .. ..	—	4	3	—	1
Erythema .. .. ..	—	2	2	—	—
Cellulitis .. .. ..	—	2	2	—	—
Infective Hepatitis .. .. ..	—	2	2	—	—
Arthritis .. .. ..	—	2	2	—	—
Salmonella Infection .. .. ..	—	3	3	—	—
Meningismus .. .. ..	—	3	3	—	—
Cervical Adenitis .. .. ..	—	1	1	—	—
Leptospirosis .. .. ..	—	3	3	—	—
Nephritis .. .. ..	—	1	1	—	—
Rheumatism .. .. ..	—	1	—	—	1
Transverse Myelitis .. .. ..	—	1	—	—	1
Rubella .. .. ..	—	1	—	—	1
Scabies .. .. ..	—	1	1	—	—
Pneumonia .. .. ..	—	10	10	—	—
Various .. .. ..	—	16	15	—	1
 TOTAL ALL DISEASES .. .. ..	18	272	274	2	14

**Cancer.**

The recorded deaths from various types of malignant disease shows a slight decrease in number as compared with 1954, viz., 255 (267).

The Table shows the deaths by age distribution :—

Age ..	Under 25 years.		25—34 years.		35—44 years.		45—54 years.		55—64 years.		65—74 years.		75 years and upwards.		All Ages.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Total.
Site.																	
Stomach ..	—	—	1	—	2	—	3	2	7	4	7	5	10	5	30	16	46
Lungs & Bronchus	—	—	—	1	4	—	7	1	19	3	12	5	5	1	47	11	58
Breast ..	—	—	—	—	—	2	—	6	—	8	—	3	—	8	—	27	27
Uterus ..	—	—	—	—	—	1	—	3	—	4	—	2	—	—	—	10	10
Leukæmia and Aleukæmia ..	—	1	—	—	—	1	—	1	1	—	—	—	—	2	1	5	6
All Others ..	2	—	2	—	3	4	8	3	13	11	19	14	14	15	61	47	108
Totals ..	2	1	3	1	9	8	18	16	40	30	38	29	29	31	139	116	255

## VENEREAL DISEASES.

FORM V.D. (R).

RETURN relating to all persons who were treated at the Treatment Centre at Royal Infirmary, Derby, during the year ended 31st December, 1955.

		<i>Totals.</i>	<i>Males.</i>	<i>Females.</i>
SYPHILIS.	1 Patients under treatment or observation on January 1st .. . . . .	215	116	99
	2 Patients removed from the Register in previous years who returned during the year for treatment or observation of the same condition ..	24	13	11
	3 Patients transferred from other centres after diagnosis .. . . . .	4	4	—
	4 Patients dealt with for the first time (excluding 2 and 3) suffering from :—			
	Syphilis, primary .. . . .	1	1	—
	" secondary .. . . .	—	—	—
	" latent in the 1st year of infection ..	1	—	1
	" cardio-vascular .. . .	3	3	—
	" of the nervous system .. . .	11	8	3
	All other late or latent stages .. . .	17	11	6
	Syphilis, congenital :—			
	Aged under 1 year .. . .	1	—	1
	Aged 1 but under 5 .. . .	—	—	—
	Aged 5 but under 15 .. . .	—	—	—
	Aged 15 and over .. . .	2	1	1
	TOTAL Item 4 .. . . . .	36	24	12
	5 Patients completing treatment and/or observation ..	60	30	30
	6 Patients transferred elsewhere .. . . .	5	3	2
	7 Patients not completing treatment and/or observation .. . . . .	7	5	2
	8 Patients under treatment or observation on December 31st (should equal Items 1 to 4 less Items 5 to 7) .. . . . .	207	119	88
	9 Patients under treatment or observation on January 1st .. . . . .	80	58	22
	10 Patients removed from the Register in previous years who returned during the year for treatment or observation of the same condition ..	—	—	—
	11 Patients transferred from other centres after diagnosis .. . . . .	3	2	1
	12 Patients dealt with for the first time (excluding Items 10 and 11) .. . . . .	168	143	25
	13 Patients completing treatment and/or observation ..	111	84	27
	14 Patients transferred elsewhere .. . . .	21	17	4
	15 Patients not completing treatment and/or observation .. . . . .	28	26	2
	16 Patients under treatment or observation on December 31st (should equal Items 9 to 12, less Items 13 to 15) .. . . . .	91	76	15

GONORRHOEA.

FORM V.D. (R).—*continued.*

OTHER CONDITIONS.			Totals.	Males.	Females.
	17	Patients under treatment or observation on January 1st .. .. .. .. ..	109	82	27
	18	Patients removed from the Register in previous years who returned during the year for treatment or observation of the same condition .. .. .. .. ..	—	—	—
	19	Patients transferred from other centres after observation .. .. .. .. ..	6	4	2
	20	Patients dealt with for the first time (excluding Items 18 and 19) suffering from:—			
		Chancroid .. .. .. .. ..	—	—	—
		Lymphogranuloma Venereum .. .. ..	—	—	—
		Granuloma Inguinale .. .. ..	—	—	—
		Non-Gonococcal Urethritis .. .. ..	131	131	—
		Any other conditions requiring treatment .. .. ..	166	124	42
		Conditions not requiring treatment .. .. ..	254	153	101
		Undiagnosed conditions .. .. ..	—	—	—
		<b>TOTAL Item 20 .. .. .. .. ..</b>	<b>551</b>	<b>408</b>	<b>143</b>
	21	Patients completing treatment and /or observation .. .. ..	512	377	135
	22	Patients transferred elsewhere .. .. ..	20	7	13
	23	Patients not completing treatment and /or observation .. .. .. .. ..	20	18	2
	24	Patients under treatment or observation on December 31st (should equal Items 17 to 20, less Items 21 to 23) .. .. .. .. ..	114	92	22

FORM V.D. (R).—*continued.*

ATTENDANCES BY PATIENTS—	<i>Totals.</i>	<i>Males.</i>	<i>Females.</i>
At which patients saw Physician :—			
Syphilis .. .. .. .. ..	2,548	1,560	988
Gonorrhœa .. .. .. .. ..	1,044	868	176
Other Conditions .. .. .. .. ..	2,079	1,699	380
At which patients did not see Physician :—			
Syphilis .. .. .. .. ..	452	337	115
Gonorrhœa .. .. .. .. ..	127	126	1
Other Conditions .. .. .. .. ..	713	677	36
CONTACTS ATTENDING FOR EXAMINATION REFERRED BY PATIENTS SUFFERING FROM			
Syphilis .. .. .. .. ..	3	2	1
Gonorrhœa .. .. .. .. ..	23	3	20
Non-Gonococcal Urethritis .. .. .. .. ..	1	—	1
Other Conditions .. .. .. .. ..	2	1	1
PATHOLOGICAL WORK—	<i>By the Physician at the Centre.</i>	<i>Sent to a Pathological Centre.</i>	
NUMBER OF SPECIMENS EXAMINED—			
Microscopical : For Syphilis .. .. .. .. ..	14	—	
,,      Others .. .. .. .. ..	1,512	26	
Cultural .. .. .. .. ..	—	30	
Serum : For Syphilis .. .. .. .. ..	—	1,516	
,,      Others .. .. .. .. ..	—	122	
Cerebro-Spinal Fluid (Number of diagnostic lumbar punctures) .. .. .. .. ..	—	9	

FORM V.D. (R).—*continued.*

SERVICES RENDERED AT THE TREATMENT CENTRE DURING THE YEAR—  
showing the Areas in which Patients dealt with for the first time (Items 4, 12 and 20)  
resided (major areas to be specified, minor areas may be grouped as "All Others").

<i>County, County Borough (England &amp; Wales) &amp; others.</i>	<i>Syphilis Item 4.</i>	<i>Gonorrhœa Item 12.</i>	<i>Other Conditions Item 20.</i>
Derby Borough .. ..	20	113	258
Derby County .. ..	13	52	256
Leicestershire .. ..	—	3	22
Others .. .. ..	3	—	15
<b>Totals (to agree with Items 4, 12 and 20) .. ..</b>	<b>36</b>	<b>168</b>	<b>551</b>

21st January, 1956.

(Signed) H. R. MORGAN RICHARDS,  
*Physician in charge of Treatment Centre.*

## VI.—TUBERCULOSIS.

Report by Dr. H. G. Grace, Consultant Chest Physician.

### Incidence.

New cases of respiratory tuberculosis in 1955 numbered 125, this figure being lower than the average for the previous six years. Of the new cases, 25 were contacts of known cases of tuberculosis, discovered when they attended the Chest Clinic for routine contact examination. A further 12 of the new cases were found to be notifiable from the 34 patients referred to the Chest Clinic by the Nottingham Mobile Mass Radiography Unit.

There was a noticeable rise in notifications of men in the 55/65 age group, an indication, one hopes, of greater readiness among "chesty" men of this age to seek medical advice. It could be associated also with the tendency among general practitioners to refer larger numbers of patients to the Chest Clinic for chest investigations.

The number of cases of non-respiratory tuberculosis notified during 1955 was abnormally low. It is difficult to believe that non-respiratory tuberculosis was diagnosed in only four cases during the year, much as one would like to accept the notification figure as a true index of incidence. Statistical information in these cases is valuable, but the real importance of notification lies in the follow-up action, *i.e.* examination of contacts and welfare work.

### Mortality.

Although the England and Wales death rate continues to fall, the number of deaths in Derby from respiratory tuberculosis showed little change in 1955 from the previous three years. Of the 22 deaths in 1955, the fact of most significance is that only two were under 35 and 11 were over 55 years of age. Six cases were not notified before death.

There were two non-respiratory deaths during 1955, the certified causes of death being :—

- (1) Tuberculous Meningitis (a male aged 5 months).
- (2) Erosion from tuberculous ulcer of the bowel (a male aged 49 years).

### Prevention.

The first visit to homes of newly notified cases of tuberculosis is made by a health visitor from the Chest Clinic as soon as possible after notification and the patient is advised *re* precautions which must be taken to avert the

spread of infection. The health visitor also arranges for contacts to attend a special contacts session at the Chest Clinic, and she urges the acceptance of B.C.G. vaccination for younger members of the infected household and others in close contact. An explanatory leaflet regarding B.C.G. vaccination is also left at the house. Subsequent routine visiting of the family is made by the same health visitor to ensure that medical advice is being followed and proper precautions taken.

Contacts are asked to attend the Chest Clinic for examination by appointment, and the following is a summary of such work done during the past six years:—

YEAR.	No. of New Cases of Tuberculosis notified.	No. of New Contacts examined.	No. of Old (or routine) Contacts re-examined.	Total Contact Attendances.	No. of Contacts found to be tuberculous.
1950	189	386	365	1,034	36
1951	149	329	266	871	13
1952	150	356	257	933	20
1953	141	359	244	953	30
1954	166	462	350	1,182	32
1955	129	450	317	1,109	25

### B.C.G. Vaccination.

Contacts vaccinated at Derby Chest Clinic during 1955 under Local Health Authority's approved Scheme	...	...	...	...	122
New-born infants vaccinated in maternity hospitals	...	...	...	...	40
<b>Total</b>					<b>162</b>

(NOTE.—Of the 450 new contacts examined during 1955, 177 were children.)

It is the practice in Derby to arrange regular re-examinations for all home contacts of infective cases of tuberculosis and these are continued for varying periods, according to circumstances, after the last exposure to infection. In certain cases, Chest Clinic supervision has been prolonged for one to two years after contact has ceased. The same rule is observed in households where death from tuberculosis has occurred without prior notification of the disease.

## Rehabilitation.

Suitable employment and conditions for tuberculous patients returning to work are very carefully selected, and, in this connection, the chest service is indebted to the medical officers of the larger industrial undertakings in Derby for the interest they have shown and the assistance they have given. All patients who have recently returned to work are, of course, kept under close supervision at the Chest Clinic.

## Care and After-Care.

The excellent co-ordination which has been established in Derby between the Chest Clinic and the Medical Officer of Health's Department was fully maintained during 1955, and co-operation between those concerned with the care and after-care of tuberculous patients has been notably successful. Details of assistance given to patients under this head appear in the Almoner's section of this Report.

## Health Visiting.

During the year, 2,229 visits were made to patients' homes by the two tuberculosis health visitors.

## Register of Notifications.

	RESPIRATORY.			NON-RESPIRATORY.			TOTAL CASES.
	Males.	Females.	Total.	Males.	Females.	Total.	
Number of cases of Tuberculosis remaining at 31/12/55 on the Register of Notifications kept by the Medical Officer of Health ... ... ...	594	438	1032	61	74	135	1167
Number of cases removed from the Register during the year by reason of:—							
1. Withdrawal of notification ...	—	—	—	—	—	—	—
2. Recovery from the disease ...	17	6	23	1	1	2	25
3. Death (all causes) ... ...	24	8	32	—	1	1	33
4. Otherwise ... ... ...	22	20	42	1	—	1	43

## Tuberculosis Notifications and Deaths, 1955.

### AGE AND SEX INCIDENCE.

Age Periods.	New Cases.*				Deaths.			
	Respiratory.		Non-respiratory.		Respiratory.		Non-respiratory.	
	M.	F.	M.	F.	M.	F.	M.	F.
0—1 years ...	2	1	—	—	—	—	1	—
1—5 „ ...	4	—	—	—	—	—	—	—
5—10 „ ...	3	3	—	—	—	—	—	—
10—15 „ ...	2	4	—	—	—	—	—	—
15—20 „ ...	7	7	—	—	—	—	—	—
20—25 „ ...	5	6	1	1	—	—	—	—
25—35 „ ...	12	9	—	2	1	1	—	—
35—45 „ ...	21	4	—	—	2	3	—	—
45—55 „ ...	5	—	—	—	3	1	1	—
55—65 „ ...	23	1	—	—	7	—	—	—
65 and upwards	5	1	—	—	4	—	—	—
<b>Totals ...</b>	<b>89</b>	<b>36</b>	<b>1</b>	<b>3</b>	<b>17</b>	<b>5</b>	<b>2</b>	<b>—</b>

\* *New Cases.*—Cases transferred to Derby during 1955 from other areas are not included.

### New Cases and Deaths. Comparative Table for Years 1949—1955.

YEAR.	RESPIRATORY TUBERCULOSIS.		NON-RESPIRATORY TUBERCULOSIS.	
	*New Cases.	Deaths.	*New Cases.	Deaths.
1949	172	71	25	11
1950	172	38	17	7
1951	133	52	16	3
1952	136	25	14	4
1953	124	21	17	2
1954	150	24	16	1
1955	125	22	4	2

\* Transfers from other areas (excluding Reg. Genl. Transferable Deaths) not included.

1955.

**Public Health (Tuberculosis) Regulations, 1952.****PART I.**

Summary of notifications of tuberculosis during the period from the 1st January, 1955, to the 31st December, 1955, in the County Borough of Derby.

AGE PERIODS.....	FORMAL NOTIFICATIONS.													
	Number of Primary Notifications of New Cases of Tuberculosis.													
	0-	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	Total (all ages).
Respiratory, Males ... ...	2	-	4	3	2	7	5	12	20	4	22	2	-	83
Respiratory, Females... ...	1	-	-	3	4	7	6	9	4	-	1	1	-	36
Non-Respiratory, Males ... ...	-	-	-	-	-	-	1	-	-	-	-	-	-	1
Non-Respiratory, Females ... ...	-	-	-	-	-	-	1	2	-	-	-	-	-	3

## PART II.

New cases of tuberculosis coming to the knowledge of the Medical Officer of Health during the above-mentioned period, otherwise than by formal notification.

SOURCE OF INFORMATION.			NUMBER OF CASES IN AGE GROUPS.												TOTAL.	
			0-	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	
Death Returns from Local Registrars.	Respiratory	M	-	-	-	-	-	-	-	-	1	-	-	2	-	3 (A)
		F	-	-	-	-	-	-	-	-	-	-	-	-	-	- (B)
	Non-Respiratory	M	-	-	-	-	-	-	-	-	-	-	-	-	-	- (C)
		F	-	-	-	-	-	-	-	-	-	-	-	-	-	- (D)
Death Returns from Registrar- General (transferable deaths).	Respiratory	M	-	-	-	-	-	-	-	-	-	-	-	-	-	- (A)
		F	-	-	-	-	-	-	-	-	-	-	-	-	-	- (B)
	Non-Respiratory	M	-	-	-	-	-	-	-	-	-	-	-	-	-	- (C)
		F	-	-	-	-	-	-	-	-	-	-	-	-	-	- (D)
Posthumous Notifications.	Respiratory	M	-	-	-	-	-	-	-	-	1	1	-	1	3	(A)
		F	-	-	-	-	-	-	-	-	-	-	-	-	-	- (B)
	Non-Respiratory	M	-	-	-	-	-	-	-	-	-	-	-	-	-	- (C)
		F	-	-	-	-	-	-	-	-	-	-	-	-	-	- (D)

TOTALS (A) .....	6
(B) .....	-
(C) .....	-
(D) .....	-

## VII.—MENTAL HEALTH.

### I. Administration.

(a) All the functions of the Local Authority and the Local Health Authority under the Lunacy and Mental Treatment Acts, 1890–1930, the Mental Deficiency Acts, 1913–1938, and Section 51 of the National Health Service Act, 1946, stand referred to the Health Services Sub-Committee, consisting of 12 members of the Health Committee, which meets monthly.

(b) Both Mental Welfare and Mental Deficiency are under the general supervision of the Medical Officer of Health.

The Medical Superintendent of the Kingsway Hospital and the Deputy Principal School Medical Officer are both approved by the Local Authority for the purpose of giving medical certificates under the Mental Deficiency Acts, 1913–1938.

The four duly authorised officers now share the duties under both the Lunacy and Mental Treatment Acts and the Mental Deficiency Acts. A female duly authorised officer, who had previously served with this Authority, was re-appointed in April to replace the female duly authorised officer who left in January.

The two male duly authorised officers were formerly qualified Relieving Officers and one female duly authorised officer has had eighteen years' experience in mental deficiency work and seven years' experience as a duly authorised officer. The other female duly authorised officer has a Bachelor of Arts degree in Administration.

During the year the staff of the Occupation Centre was maintained at full establishment.

The qualified supervisor holds the Diploma of the Central Association for Mental Welfare and, in addition, there are two female unqualified supervisors and a male unqualified supervisor, the latter taking the senior boys' class.

(c) The duly authorised officers supervise cases on licence from Hollow Meadows, Ridgeway Hospital, Stallington Hall, Stoke Park Colony, Aston Hall and Princess Christian's Farm Colony.

66 visits in connection with renewal of Order under Section 11 and applications for holidays were paid on behalf of 21 institutions.

(d) No duties are delegated to voluntary organisations.

## II. Account of Work Undertaken in the Community.

(a) Under Section 28, National Health Service Act, 1946, Prevention, Care and After-care :—

### Prevention.

The duly authorised officers made 1,397 visits and dealt with 220 cases as follows :—

37 neurotic and confusion cases with domestic difficulties :—

Following visits to each case and contact with employers and other officials, improvement in domestic relations was eventually brought about in all cases.

4 males were found other employment.

4 females were found other employment.

57 persons were persuaded and taken to undergo out-patient treatment at Kingsway Mental Hospital.

2 males persuaded to attend rehabilitation centre.

3 females persuaded to attend rehabilitation centre.

4 males found lodgings.

3 females found lodgings.

64 patients are receiving regular visits for observation.

3 males persuaded to attend general practitioner for treatment and domestic problems solved.

10 females persuaded to attend general practitioner.

6 males persuaded to attend general practitioner.

10 cases investigated proved to be caused mainly by neighbours' quarrels. Differences adjusted in many cases.

22 cases—arrangements were made for elderly, mildly confused patients to be admitted to Manor Hospital.

1 case to convalescent home.

Elderly widower, living alone, confused and demented, became a nuisance to his neighbours, tradesmen, rent collector, etc. Complaints were received by the Police and Housing Departments and reports made to this Department. After a number of visits and inquiries it was eventually arranged for him to live with a married daughter.

Woman, aged 80 years, and single son, aged 50 years. Both of these people have been extremely unstable for a number of years and have been the subject of complaints from neighbours and reports from the Police. Usually, visits by the D.A.O., particularly to the neighbours, have brought good results and peace and quietness has been obtained. Eventually, however, the situation deteriorated and the neighbour's wife became ill, and her doctor insisted that some action be taken. The old lady and her son refused to listen to reason and insisted that the neighbours were introducing evil smells into their house and into the water system. A Justice was informed and he ordered that they both be examined as to their mental state, but agreed with the family doctors that a domiciliary visit be made by a psychiatrist. The psychiatrist reported that they were both mentally unstable, but it was decided by the Magistrate that they be allowed to remain at home owing to the old lady's age, and for the son to remain to look after her. After explaining to the son and appealing for reason he brought the vicar of the parish and later a representative from a firm of solicitors. Both parties were satisfied with the way the case had been dealt with. All is quiet at the time of reporting and a close observation is being maintained.

Woman, aged 86 years, became confused and rather difficult. She wandered away from home and was taken back to her husband, aged 85 years. Medical aid and Home Help were obtained. After several visits she settled down.

Middle-aged man quarrelled frequently with his wife and would become suspicious regarding her without any just cause. After visiting and some reassuring conversation he was placated for quite long periods without having recourse to the Mental Hospital.

Elderly male, living in a room at a lodging house, believes he owns the place. He says he has "shares" in the Cathedral and that he writes all the choral music. Occasionally he becomes a nuisance to his fellow lodgers, but usually calms down again after he has been visited.

Widow, aged 46 years, suffering from depression. After several home visits to ascertain the cause of her condition, she reluctantly stated that a male boarder, of whom she was afraid, had struck her on several occasions when he was drunk, because she resisted his suggestions. He was given notice to leave but refused. After threatening to report his behaviour to the police he did so. The woman is now working, has gained weight and is generally happy and comfortable living alone. No further visits necessary.

Woman, aged 38 years with two children, ages 15 and 10 years, was suffering from acute depression, owing to the husband's desertion. Refused treatment at out-patients' clinic. National Assistance Board asked to visit and immediate financial help was given. The husband was located by the D.A.O. after four weeks and was found to be cohabiting. He refused to return to his wife and children. The wife was taken to the Probation Officer. Summons for maintenance granted and Maintenance Order duly made by Justices. Part-time employment was found for the woman ; later employed full-time. The woman is now very well and has had no recurrence of depression.

Elderly woman, living alone, fell and broke her wrist. She refused to go to hospital for treatment, neglected herself, refused to eat and became weak and ill as a result. She would only open the door after persistent knocking. After intensive visiting, eventually the visitor gained the confidence of the old lady and she was persuaded to go to hospital to have her wrist set and from there was transferred to a Convalescent Home, where she regained a reasonable degree of health and strength, sufficient to enable her to come home and manage her home again.

Middle-aged widow suffering from an anxiety state due to continual nursing of an aged mother, which prevented her from working and meeting their financial needs. After making inquiries from her employer it was found that she was due to her wages for a certain period. This was followed by a maintenance allowance until she was able to return to work. This relieved her to such an extent that she was soon able to overcome her symptoms and eventually arrangements were made for a young couple in search of rooms to lodge with her, the wife being able to watch over the mother during the day, while the patient resumed her normal work.

### **Care.**

The duly authorised officers dealt with 266 cases as follows :—

87 cases persuaded to undergo voluntary treatment.

19 cases discharged by Justice.

### **144 mental patients :—**

Claiming of wages, National Insurance, National Assistance, Disability Pensions, Retirement Pensions, Unemployment Benefit, general welfare inquiries, the storing of personal property and communications with distant relatives on their behalf.

6 male patients helped to settle domestic affairs.

10 female patients helped to settle domestic affairs.

Man, wife and two children. The patient is Polish and his wife German.

The man suffered under the delusion that his wife was unfaithful to him and was intimate with every man she met. After prolonged social help and observation he became increasingly violent and threatened to kill his wife, and it was found necessary to admit him to hospital. Owing to the wife's inability to speak English a great deal of help was given by this Department, especially by the female D.A.O.'s. Wages, National Insurance and National Assistance were applied for on her behalf and she was protected against the action of her landlord when he attempted to evict her from the house. The wife and children were comfortable and the home intact when the man was discharged.

Man, wife and two children. Both man and his wife were depressed, extremely unstable and in need of mental treatment. Although their financial situation was comfortable they lived in a small, dark, slum-type house. The wife was persuaded to enter hospital first, the man and the children remaining at home. The children were partly cared for by the maternal grandmother. Unfortunately, the man's mental condition deteriorated and he was persuaded to enter hospital voluntarily. Arrangements were made for the care of the children and the house. The man has since been discharged and he was persuaded and helped to obtain a larger house in a bright, clean neighbourhood.

Man, wife and two children. Man was extremely depressed and attempted to commit suicide. The domestic situation was unhappy and he was in financial difficulties, being unable to meet his hire-purchase agreements. The wife changed her attitude and became co-operative. The various H.P. firms were contacted and they agreed to postpone payments while he was in hospital and to receive lower payments after his discharge and return to work, until he was financially stable.

An elderly neurotic patient was persuaded after months of visiting to enter hospital as a voluntary patient. During his stay of two months, constant home visiting was undertaken to assure the patient that his wife was managing the home satisfactorily. When discharged he was much improved and his wife, fortified by the rest which his stay in hospital had made possible, was able to deal with a difficult situation with renewed energy.

Elderly woman, living alone, in an acutely depressed state, would not consent to go into hospital for treatment because there was no one with whom to leave her two cats. Arrangements were made for some neighbours and later the R.S.P.C.A. to care for the cats, and the patient underwent a course of hospital treatment to good effect.

### **After-Care.**

The duly authorised officers made 738 visits and dealt with 226 cases as follows :—

- 19 males were returned to regular employment, two of whom were found lodgings.
- 5 males found new lodgings.
- 14 females were returned to regular employment.
- 17 males kept under constant supervision.
- 30 females kept under constant supervision.
- 14 males re-admitted to mental hospital.
- 10 females re-admitted to mental hospital.
- 3 males persuaded to attend rehabilitation centre.
- 2 females persuaded to attend rehabilitation centre.
- 3 females sent to convalescent home.
- 5 males found change of employment.
- 5 females found change of employment.
- 2 males persuaded to continue with out-patient treatment.
- 10 females persuaded to continue with out-patient treatment.
- 87 cases visited at regular intervals.

Elderly lady, who was discharged from Mental Hospital six months ago, calls at the office once or twice weekly. After discussing her little troubles goes away quite happy until they start again in a few days.

Young widower quite often becomes depressed and quarrels with mother regarding his little daughter. Mother also rather difficult. So far, by frequent visiting, we have been able to smooth matters.

A female insisted upon living alone and possibly for that reason has been re-admitted to hospital suffering from melancholia. It was decided that she must not live alone, and relatives were persuaded to have her to live with them. She is now quite happy and contented and working regularly.

Female, aged 28 years. Clerk. Apart from husband. Has one child, aged 7 years. She was a hospital patient for over four years. Parents cared for child during her stay in hospital and received Maintenance Order which was made prior to admission to hospital. Upon discharge she was found employment in two different trades and then, to satisfy a particular desire she had for cooking, she was found another post as assistant cook in large works, and has done very well. Has occasional bout of depression but manages to recover quickly without medical aid.

Young woman, aged 26 years, deteriorating since discharge, was persuaded to undergo a course of E.C.T. at the out-patients' clinic, followed by two months daily attendance at the Industrial Rehabilitation Unit. She has now been working well and has settled down to a well adjusted existence. Home visiting to help with domestic problems had been carried on continuously, and now the family appears well able to manage its own affairs.

Married woman, aged 36 years, who had received hospital treatment following a miscarriage a few years previously and was still exceedingly apprehensive, became pregnant again. Constant visits to give reassurance during pregnancy were made and eventually the patient gave birth to a daughter without suffering any recurrence of previous symptoms. She is now gaining confidence and is making an admirable mother.

### **Co-ordination.**

A monthly meeting is held in the Council House for the purpose of discussing particular cases and their attendant problems. This is attended by officials of the Mental Health, Almoners, and Health Visiting sections of the Health Department, the Welfare, Housing, and Children's Departments, School Attendance Officers, a Probation Officer and an Inspector of the National Society for the Prevention of Cruelty to Children.

This meeting is held to ensure that the different departments are possessed with full knowledge of a particular case, and to prevent visits from more than one official.

Apart from the monthly meetings, there are day-to-day contacts between the officers of the several departments and the hospitals in the borough, by which the particular work is simplified and overlapping avoided.

## (b) Under the Lunacy and Mental Treatment Acts, 1890-1930.

Section . .	M.	Lunacy Act, 1890.				Mental Treatment Act, 1930.		TOTAL.
		20	21(1)	16	4	1	5	
Under 16 years . .	M.	1	2	—	—	1	—	4
	F.	1	—	—	—	—	—	1
16 to 25 years . .	M.	4	2	5	—	2	—	13
	F.	11	—	—	—	1	—	12
25 to 35 years . .	M.	17	2	7	—	10	—	36
	F.	10	1	—	—	10	—	21
35 to 45 years . .	M.	11	1	—	—	3	—	15
	F.	8	8	2	—	7	—	25
45 to 55 years . .	M.	18	2	2	—	7	1	30
	F.	8	6	1	—	11	2	28
55 to 65 years . .	M.	6	1	1	—	8	—	16
	F.	9	8	1	—	14	—	32
65 to 75 years . .	M.	6	7	5	—	4	1	23
	F.	8	7	2	—	4	1	22
75 to 85 years . .	M.	7	2	3	—	1	1	14
	F.	2	5	3	—	4	2	16
85 to 95 years . .	M.	—	—	—	—	—	—	—
	F.	2	—	1	—	—	—	3
TOTAL . .	M.	70	19	23	—	36	3	151
	F.	59	35	10	—	51	5	160

17 aliens are included in the above.

131 psychiatric social histories were supplied by the duly authorised officers.

56 persons taken to Kingsway out-patients' clinic, involving 127 visits.

Dr. Barbour, Medical Superintendent, Kingsway Hospital, Derby, holds a weekly meeting each Monday, at which his medical staff, the occupational therapists and the duly authorised officers are present. The admissions and discharges during the previous week are discussed and information exchanged regarding patients as to their future, after-care and rehabilitation in civil and industrial life. In between meetings the Superintendent maintains contact by seeking the aid of the duly authorised officers with regard to any inquiry he wishes to be made and by obtaining and forwarding to him any patient's social history.

By permission of the Medical Superintendent, the duly authorised officers are allowed to see patients on any day with a view to relieving them of domestic, financial and other matters which may be causing them concern. Co-operation is readily given by all concerned.

Thanks are tendered to the Medical Superintendent, doctors and staff of Kingsway Mental Hospital, also to the magistrates, doctors and police for their help and co-operation in carrying out the difficult duties under the Lunacy and Mental Treatment Acts.

The help and co-operation of all sections of the Ministry of Labour, also that of the National Assistance Board and the Ministry of National Insurance and Pensions, is greatly appreciated.

## (e) Under the Mental Deficiency Acts, 1913—1938.

	Under age 16.		Aged 16 and over.	
	M.	F.	M.	F.
(i) ASCERTAINMENT, Etc.				
1. Particulars of cases reported during 1955				
(a) Cases at 31st December, 1955, ascertained to be defectives "subject to be dealt with" ..	1	6	7	7
Number in which action taken on reports by—				
(1) Local Education Authorities on children				
(i) While at school or liable to attend school .. .. ..	1	6	—	—
(ii) On leaving special schools .. ..	—	—	6	6
(iii) On leaving ordinary schools .. ..	—	—	—	—
(2) Police or by Courts .. .. ..	—	—	—	—
(3) Other sources .. .. ..	—	—	1	1
(b) Cases reported who were found to be defectives but were not, at 31st December, 1955, regarded as "subject to be dealt with" on any ground ..	—	—	2	2
(c) Cases reported who were not regarded as defectives or in which action was incomplete at 31st December, 1955, and are thus excluded from (a) or (b) .. .. ..	—	—	—	—
TOTAL .. .. ..	1	6	9	9
2. Disposal of cases reported during 1955				
(a) Of the cases ascertained to be defective "subject to be dealt with" (i.e., at 1 (a)), number				
(i) Placed under Statutory Supervision .. ..	1	6	6	7
(ii) Placed under Guardianship .. ..	—	—	—	—
(iii) Taken to "Places of Safety" .. ..	—	—	—	—
(iv) Admitted to Hospitals .. .. ..	—	—	1	—
(b) Of the cases not ascertained to be defectives "subject to be dealt with" (i.e., at 1 (b)), number				
(i) Placed under Voluntary Supervision .. ..	—	—	2	2
(ii) Action unnecessary .. .. ..	—	—	—	—
TOTAL .. .. ..	1	6	9	9
3. Number of mental defectives for whom care was arranged by the local health authority under Circular 5/52 during 1955 and admitted to				
(a) National Health Service hospitals .. .. ..	5	1	—	—
(b) Elsewhere .. .. ..	—	—	—	—
TOTAL .. .. ..	5	1	—	—

		Under age 16.		Aged 16 and over.	
		M.	F.	M.	F.
<b>4. Total cases on Authority's Registers at 31/12/55</b>					
(i) Under Statutory Supervision .. .. ..	35	38	110	93	
(ii) Under Guardianship .. .. ..	—	—	3	5	
(iii) In "Places of Safety" .. .. ..	—	—	—	—	
(iv) In Hospitals .. .. ..	3	3	68	89	
(v) Under Voluntary Supervision .. .. ..	—	—	29	24	
<b>TOTAL .. .. ..</b>	<b>38</b>	<b>41</b>	<b>210</b>	<b>211</b>	
<b>5. Number of defectives under Guardianship on 31st December, 1955, who were dealt with under the provisions of Section 8 or 9, Mental Deficiency Act, 1913. (Included in 4 (ii)) .. .. .. .. ..</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>	<b>—</b>
<b>6. Classification of defectives in the Community on 31/12/55 (according to need at that date)</b>					
(a) Cases included in 4 (i)—(iii) in need of hospital care and reported accordingly to the hospital authority .. .. .. .. ..	11	6	9	1	
(1) In urgent need of hospital care:—					
(i) "cot and chair" cases .. ..	1	4	—	—	
(ii) ambulant low grade cases .. ..	7	2	9	—	
(iii) medium grade cases .. ..	3	—	—	—	
(iv) high grade cases .. ..	—	—	—	1	
<b>Total urgent cases .. ..</b>	<b>11</b>	<b>6</b>	<b>9</b>	<b>1</b>	
(2) Not in urgent need of hospital care:—					
(i) "cot and chair" cases .. ..	—	—	1	—	
(ii) ambulant low grade cases .. ..	2	1	3	—	
(iii) medium grade cases .. ..	4	—	—	—	
(iv) high grade cases .. ..	—	—	—	1	
<b>Total non-urgent cases .. ..</b>	<b>6</b>	<b>1</b>	<b>4</b>	<b>1</b>	
<b>TOTAL .. .. ..</b>	<b>17</b>	<b>7</b>	<b>13</b>	<b>2</b>	
(b) Of the cases included in items 4 (i), (ii) and (v), number considered suitable for:—					
(i) occupation centre .. .. ..	22	21	23	14	
(ii) industrial centre .. .. ..	—	—	—	—	
(iii) home training .. .. ..	—	—	—	—	
<b>TOTAL .. .. ..</b>	<b>22</b>	<b>21</b>	<b>23</b>	<b>14</b>	
(c) Of the cases included in 6 (b), number receiving training on 31/12/55:—					
(i) In occupation centre .. .. ..	11	14	9	3	
(ii) In industrial centre .. .. ..	—	—	—	—	
(iii) At home .. .. ..	—	—	—	—	
<b>TOTAL .. .. ..</b>	<b>11</b>	<b>14</b>	<b>9</b>	<b>3</b>	

Number of mental defectives who were in institutions, under community care (including voluntary supervision) or in "places of safety" on 1st January, 1955, who have ceased to be under any of these forms of care during 1955.

				<i>Males.</i>	<i>Females.</i>	<i>Total.</i>
(a) Ceased to be under care	..	..	..	1	3	4
(b) Died, removed from the area, or lost sight of		..	..	6	5	11
Total	..	..	..	7	8	15

Of the total number of mental defectives under Supervision or Guardianship or no longer under care :—

(a) Number who have given birth to children while unmarried during 1955 .. 1

	<i>Males.</i>	<i>Females.</i>
(b) Number who have married during 1955 .. .. ..	1	3

## (ii) GUARDIANSHIP AND SUPERVISION.

At the end of 1955 there were 276 mental defectives under Statutory Supervision, 71 being under the age of 16 years ; also 53 were under Voluntary Supervision.

Of the total number of mental defectives, 113 were in employment, 37 were attending the Occupation Centre, and 126 were at home.

163 Derby cases were in 24 different hospitals throughout the country.

In addition, 8 defectives over the age of 16 years were under Guardianship and there were 9 defectives on licence in the Borough.

The duly authorised officers carried out 898 domiciliary visits during the year and 15 cases were found to be socially stabilised and no longer in need of care.

As a result of these visits it has been possible to assist many defectives in employment, domestic and financial problems.

27 defectives, 17 of them under the age of 16 years, were in urgent need of institutional care at the end of the year.

1 certified defective was admitted to Whittington Hall.

2 certified defectives were admitted to Makeney House.

2 defectives were admitted to Glen Frith Hospital, Leicester—short term care.

2 defectives were admitted to Aston Hall Hospital—short term care.

1 defective was admitted to Thundercliffe Grange—short term care.

1 defective was admitted to Ridgeway Hospital—short term care.

There were no cases under Section 8 of the Education Act, 1944.

## (iii) TRAINING.

The Occupation Centre provides training for 40 mental defectives, divided into four groups.

The senior boys cultivate an allotment, and during the spring and summer much of their time is taken up with gardening activities. When bad weather keeps them in the class-room they are occupied with such activities as rug-making and the assembling and seating of stools. Recently simple woodwork has been introduced and is very much enjoyed by the boys.

The older girls learn a variety of handicrafts such as simple embroidery, weaving, netting, cane basketry, knitting and some plain sewing, which includes the use of a sewing machine. Some simple cookery is also undertaken.

The two senior groups also share such domestic activities as cleaning forks and spoons, setting tables, helping to serve the mid-day meal, and the drying of plates and cutlery after the meal.

The senior groups meet for such activities as folk and ballroom dancing, choral singing and percussion band.

In the two junior classes sexes are mixed. In these groups more time is given to activities which stimulate speech, which is often very retarded in these children. Musical activities of various kinds help towards better physical co-ordination. Painting, printing, plasticine modelling, the making and manipulating of puppets and simple handicrafts are also included in the day's activities.

During the year six new children, all under the age of 14 years, have been admitted to the Centre.

A day's outing to Cleethorpes was arranged in July and was much appreciated by the children.

Early in December parents and friends were invited to a carol concert and exhibition of handwork.

The children's Christmas party was on December 20th, when each child received a gift from the large Christmas tree. A visit to the pantomime was arranged for January, 1956.

## VIII.—SOCIO-MEDICAL WORK

Report by Mr. R. L. Carabine, Almoner.

This is the eighth report on socio-medical work since the introduction of the Health Services in 1948, and, in common with many branches of the service, a stage has been reached at which it becomes difficult to avoid repetition in recording a past year. However, this should not be taken to indicate a static situation ; on the contrary, several problems have provided stimulus to critical thought. Perhaps the major problem confronting the section has been the selection of cases so as to ensure that the maximum effort of skill and time is applied to those most requiring the personal guidance of a case-worker. Applying such a selective policy is far from simple since many apparently straightforward cases reveal, on investigation, complications not suspected in the initial request. A typical example may be the case of a widow suffering from thyroid trouble who asks for advice and help in obtaining an exchange of housing. It appears that she has quarrelled with the neighbours and, from trivialities, an almost hysterical bitterness is fast developing. Is this case to be assisted with her request ? If so, will her condition and attitude result in a repetition of present circumstances ? Considerable time will be required in interviewing this patient, her relatives, and possibly her neighbours, before the case-worker can arrive at a decision, and should that decision seem contrary to the patient's wishes a good deal of time and patience will be required to bring about a reorientation and enable the client to appreciate her position. Those who doubt this will reflect that whilst advice is easy to give it is seldom acted upon and, therefore, in this instance, the essence of casework must be to enable the patient, by discussion and personal contact, to arrive at a decision which has been considered in partnership but which is to all outward intents the client's own.

A further complication to this selection of cases has been the increasing case-load, and during the year it became obvious that an effort must be made to damp down the number of cases referred to the almoners. There can be little doubt that many cases originating from the hospitals could be more expeditiously dealt with while they are in-patients, had the hospitals the necessary staff, and in this connection it is pleasing to note that at the time of writing there are signs that this is recognised.

It is to be hoped that any increase in the hospital almoning staff will allow this Authority's workers an opportunity for following up more assiduously those cases requiring long-term care, and possibly an increased effort with the general practitioner's patients known to be in need of social-therapy.

As will be seen from the figures given overleaf, tuberculosis apart, respiratory, cardiac and circulatory conditions formed, with cancer, the most frequent referrals. A proportion of the first two were continuing cases from previous years. They represent the semi-chronic who manages to hold his own in fair weather but who, during winter, or, on running into life's usual problems, requires to be buttressed. Such cases, together with those whose social functioning can be described as mildly or grossly inadequate, may be relied upon to re-appear from year to year. The measure of success in these cases is the gradually increasing time gaps occurring between their appeals for assistance, while complete success may be said to have been achieved when the previously inadequate asthmatic or bronchitic overcomes his difficulties without recourse to the case-worker.

From all this it will be seen that the work, while largely concerned with those who have suffered ill-health, is mostly concerned with prevention—the prevention of ill-health in the patient's immediate circle and the prevention of further illness to the patient himself.

The ready co-operation and assistance given by general practitioners, hospitals and social agencies throughout the year has encouraged the almoners to believe that this work is indeed recognised as of direct value in the prevention and treatment of ill-health.

### **Tuberculosis.**

The Derby Chest Clinic continued as in previous years to afford every opportunity for personal contact both with the patient and the staff. All new cases of tuberculosis are advised as to the community services available to them within a few days of being diagnosed, and their social position is assessed in the light of medical advice. Some three hundred and forty-six new and old cases were assisted during the year, many requiring only slight social action, others presenting difficult and long-term problems. Family discord is not more common among the tuberculous than any other section of the community, but it is frequently complicated by a lack of understanding, which, it is regretted, still persists. The tuberculous patient is still sensitive, and the chance remarks of a husband or wife or inquisitive neighbour have a chain reaction. The patient, out of sanatorium but still on domiciliary treatment, often complains bitterly of those well-intending people who remark how fit he appears and how no doubt he will soon be back at work. In other forms of illness such remarks tend on the whole to be taken lightly, but with the tuberculous, whose appearance belies his true condition, they can be

misinterpreted as insinuations of "lead-swinging", etc. The social worker is therefore often the person to whom the patient can unburden with the knowledge that his position is appreciated, and opportunities are thus offered for what might be termed social-therapy with a psychological emphasis. This is of particular importance in those cases who may feel they are not making the progress they anticipated or where the now quiescent patient shows a reluctance to re-enter the competitive world.

Close co-operation continued throughout the year with the D.R.O.'s of the Ministry of Labour and, while one hundred per cent. success could not be claimed, the rehabilitation of patients was, on the whole, satisfactory. The part played in this field by the Industrial Rehabilitation Unit is frequently a vital one, and Derby is fortunate in having at the Long Eaton Unit a keen and sympathetic team who can be relied upon to provide not only a period of planned rehabilitation, but when indicated, a thorough investigation and assessment of ability.

Appreciation must again be expressed to all those voluntary and statutory agencies, both in Derby and elsewhere, without whose aid the work would undoubtedly be quite impossible, not the least of these being the Health Committee of this Authority, whose interest and sympathy have provided a sure foundation.

#### **Number of New Patients referred to Almoners.**

Hospitals	...	...	...	...	...	1,040
Derby Chest Clinic	...	...	...	...	...	257
General Practitioners	...	...	...	...	...	83
Health Workers	...	...	...	...	...	41
Non-medical sources	...	...	...	...	...	35
Patients' own approach	...	...	...	...	...	88
						1,544

These cases were classified as suffering from :—

Tuberculosis	...	...	346	Gastric disorders	...	...	72
Chest conditions	...	...	94	Cancer	...	...	158
Cardiac and circulatory	...	163		Cerebral tumours	...	...	5
Nervous disorders	...	19		Orthopaedic conditions	...	...	110
Rheumatism, etc.	...	33		Venereal diseases	...	...	2
Paralysis (all forms)	...	24		Epilepsy	...	...	2
Debility	...	15		Major surgical	...	...	220
Diabetes	...	39		Other medical and surgical con-			
				ditions	...	...	296

### Provision of Free Milk, Clothing, etc.

99 patients received free milk at the rate of two pints per day—  
approximate cost £1,268.

14 patients were helped with clothing, bed linen, etc., at a cost of £83 17s. 8d.

### Housing.

Recommended for priority housing	...	...	20
Rehoused	...	...	18

### Convalescence.

Fifteen Patients were sent for Preventive and Recuperative Convalescence  
at a cost of approximately £83 18s. 5d.

Forty Patients were also sent for similar convalescence through other  
agencies.

### Rehabilitation.

28 Patients were registered as Disabled Persons.  
26 „ „ sent for rehabilitation and training.  
38 „ „ returned to work.

### General Care.

Evidence of the widespread nature of problems encountered is given  
by the number of patients assisted through the following sources:—

146 patients were assisted through the National Assistance Board.

76	„	„	„	„	„	voluntary agencies.
69	„	„	„	„	„	hospitals.
39	„	„	„	„	„	Ministry of Labour.
28	„	„	„	„	„	general practitioners.
26	„	„	„	„	„	Home Help Section.
24	„	„	„	„	„	Ministry of National Insurance.
22	„	„	„	„	„	Welfare Department.
19	„	„	„	„	„	Education Department.
18	„	„	„	„	„	Housing Department.
14	„	„	„	„	„	employers.
12	„	„	„	„	„	health workers.
4	„	„	„	„	„	legal aid sources.
3	„	„	„	„	„	sanitary inspectors.
3	„	„	„	„	„	probation officers.
1	„	„	„	„	„	Children's Officer.

The following chronic sick cases were visited by the Authority's health visitors to ascertain suitability for hospital care :—

Number of chronic sick cases visited during the year	...	...	325
Number recommended—"Emergency" ...	...	...	174
"Urgent admission" ...	...	...	116
"Normal admission from waiting list" ...	...	30	
"Can be cared for at home" ...	...	—	
"Suitable for Part III accommodation" ...	...	5	

The following visits to expectant mothers desiring hospital confinements were carried out by domiciliary midwives :—

Number of expectant mothers visited during the year	...	...	289
Number recommended—"Hospital essential" ...	...	...	109
"Hospital desirable" ...	...	...	18
"Can be cared for at home" ...	...	162	

## IX.—MISCELLANEOUS

### **Home Nursing.**

The arrangements made for the provision of a Home Nursing Service, as required by the National Health Service Act, 1946, continued to work satisfactorily during 1955.

An analysis of the numbers and types of cases dealt with during the years 1951–1955 is appended.

	1951	1952	1953	1954	1955
Number of cases on Register at beginning of the period ...	240	250	277	301	335
New cases during the period ...	1,487	1,600	1,693	2,012	2,085
Total number of cases attended during the period ... ...	1,727	1,850	1,970	2,313	2,420
Total number of visits during the period ... ... ...	46,402	52,783	55,133	59,543	65,981

The new cases during 1955 were referred from the following sources:—

Doctors	...	...	...	1,539	Personal application by patient	...	3
Hospitals	...	...	...	493	Bed Bureau	...	...
Relatives	...	...	...	13	Women's Voluntary Service	...	—
Midwives	...	...	...	13	Transfers	...	...
Welfare Officers	...	...	...	13	Clergy	...	...
Neighbours	...	...	...	—	Medical Officer of Health	...	1

## CLASSIFICATION OF CASES ATTENDED DURING THE YEAR 1955.

Tuberculosis of Respiratory System	..	..	..	..	..	..	..	3
Tuberculosis, Other Forms..	..	..	..	..	..	..	..	1
Streptomycin	..	..	..	..	..	..	..	77
Certain Diseases common among children (Measles, etc.)	..	..	..	..	..	..	..	5
Diseases due to Helminths	..	..	..	..	..	..	..	—
Malignant Neoplasms (all sites)	..	..	..	..	..	..	..	134
Benign and unspecified Neoplasms	..	..	..	..	..	..	..	1
Diabetes Mellitus	..	..	..	..	..	..	..	38
Anæmias	..	..	..	..	..	..	..	18
Vascular Lesions affecting Central Nervous System	..	..	..	..	..	..	..	172
Diseases of the Eye	..	..	..	..	..	..	..	7
Diseases of the Ear and Mastoid Process	..	..	..	..	..	..	..	21
Rheumatic Fever	..	..	..	..	..	..	..	—
Arterio-sclerotic and Degenerative Heart Disease	..	..	..	..	..	..	..	265
Diseases of Veins	..	..	..	..	..	..	..	53
Acute Pharyngitis and Tonsillitis..	..	..	..	..	..	..	..	60
Influenza	..	..	..	..	..	..	..	8
Pneumonia	..	..	..	..	..	..	..	81
Bronchitis	..	..	..	..	..	..	..	111
All Other Respiratory Diseases	..	..	..	..	..	..	..	36
Appendicitis, Hysterectomy, Hernia of Abdominal Cavity	..	..	..	..	..	..	..	110
Diseases of Gall Bladder and Bile Ducts	..	..	..	..	..	..	..	15
Other Diseases of the Digestive System	..	..	..	..	..	..	..	186
Diseases of Genital Organs	..	..	..	..	..	..	..	41
Complications of Pregnancy, Childbirth and Puerperium	..	..	..	..	..	..	..	10
Miscarriages	..	..	..	..	..	..	..	6
Bedsores	..	..	..	..	..	..	..	14
Infections in Infants under 14 days	..	..	..	..	..	..	..	1
Boils, Abscesses, Cellulitis, etc.	..	..	..	..	..	..	..	102
Other Diseases of the Skin	..	..	..	..	..	..	..	35
Arthritis and Rheumatism	..	..	..	..	..	..	..	29
Congenital Malformations and other Diseases due to Early Infancy	..	..	..	..	..	..	..	3
All Other Specified and Ill-defined Diseases	..	..	..	..	..	..	..	18
Accidents, Poisoning and Violence	..	..	..	..	..	..	..	65
Senility	..	..	..	..	..	..	..	94
Preparation for X-Ray	..	..	..	..	..	..	..	177
Breast Abscess	..	..	..	..	..	..	..	27
Amputation of Leg	..	..	..	..	..	..	..	6
Orthopædic Cases	..	..	..	..	..	..	..	10
Mastitis	..	..	..	..	..	..	..	10
Renal Diseases	..	..	..	..	..	..	..	17
Mastectomy	..	..	..	..	..	..	..	6
Gangrene	..	..	..	..	..	..	..	3
Herpes Zoster	..	..	..	..	..	..	..	8
Conococcal Infection	..	..	..	..	..	..	..	1
								2,085
Chronic Cases	..	..	..	..	284			
Acute Cases ..	..	..	..	..	1,801			

During the year, 10,843 visits to new patients were made for hypodermic injections only.

Details are as follows :—

Streptomycin—			<i>Patients.</i>	<i>Visits.</i>
Tuberculosis diagnosed ...	...	...	77	2,427
Tuberculosis not diagnosed	...	...	6	92
Mersalyl and neptal ...	...	...	142	2,947
Vitamin B.12 ...	...	...	3	120
Cardophlin	...	...	2	9
Cytamen	...	...	23	383
Insulin ...	...	...	36	2,407
Narcotics	...	...	7	467
Adrenalin	...	...	2	29
Antibiotics	...	...	307	1,962

A quantity of home nursing equipment is kept in stock at the Royal Nursing Institution and is issued on loan at the request of nurses, doctors or relatives, no charge being made provided the equipment is returned intact. The British Red Cross Society assist with items temporarily out of stock or when the Local Authority is unable to supply the item requested.

The following equipment was loaned out during 1955 :—

		<i>Stock.</i>	<i>Cases Assisted.</i>
Bedpans, Stainless Steel and Porcelain	.. ..	110	235
Back Rests	.. .. .. ..	72	163
Air Rings	.. .. .. ..	68	151
Mackintosh Sheets	.. .. .. ..	72	176
Bed Cradles	.. .. .. ..	25	44
Urinals, Male	.. .. .. ..	41	96
Urinals, Female	.. .. .. ..	12	12
Feeding Cups	.. .. .. ..	16	23
Rubber Bedpans	.. .. .. ..	7	21
Breast Pumps	.. .. .. ..	1	2
Hot Water Bottles	.. .. .. ..	5	4
Air Beds	.. .. .. ..	2	2
Air Pumps	.. .. .. ..	1	—
Douche Cans	.. .. .. ..	4	1
Night Commodes	.. .. .. ..	4	9
Bath Chairs	.. .. .. ..	2	4
Sorbo Bed	.. .. .. ..	4	13
Sponge Rings	.. .. .. ..	1	1
Lilo	.. .. .. ..	1	4

## Home and Domestic Helps.

During the year, 775 applications were received, the same number as during 1954.

Details are as follows :—

			No. of applications received.	Assessed at			No. of applications withdrawn.	Assessed at		
				Full Fee.	Reduced Fee.	Free.		Full Fee.	Reduced Fee.	
Home Helps—Maternity	...	...	36	13	10	3	23	9	14	
Domestic Helps—										
Illness	...	...	75	62	29	31	2	13	5	8
Tuberculosis	...	...	9	9	2	7	—	—	—	—
Aged and Blind	...	...	655	638	51	584	3	17	1	16
<b>TOTAL</b>	<b>...</b>	<b>...</b>	<b>775</b>	<b>722</b>	<b>92</b>	<b>625</b>	<b>5</b>	<b>53</b>	<b>15</b>	<b>38</b>

The detailed comparison for the years 1951–1955 is as follows :—

Year.	Applications Received (inc. old cases).	Applications Withdrawn.	Full Fee Charged.	Reduced Fee Charged.	No Fee Charged.	Home Helps Employed.	Attendances Made.
1951	651	51	56	533	11	69	18,599
1952	656	31	78	538	9	75	19,027
1953	691	48	101	540	2	85	20,313
1954	775	31	98	641	5	98	23,721
1955	775	53	92	625	5	81	22,909

The number of three-hourly attendances made by the home helps during the year was 22,909, and 1,805 visits were made by the Supervisor and Assistant. Help is sent into approximately 500 homes each week.

During the past year the proportion of aged people applying for the services of a home help to enable them to continue to live in their own homes became increasingly noticeable. There are, however, several factors to be taken into consideration, and each case must be decided on its own merit. Some of the old people appear mentally alert, and their physical condition enables them to get about well and to do their own housework and shopping.

Then there are others who seem to grow old very quickly. This is quite often due to lack of interest by their families, loneliness and anxiety for the future.

The services of a nurse, W.V.S. meals, and one or two weekly visits by the home help appear in some cases to be inadequate. These are problem cases which need constant supervision, and where the Home Help Service overlaps with the Welfare Service.

The work done by the home helps for old people is really excellent. They often work under very difficult and disagreeable conditions. When dealing with such cases, one needs tact and understanding, a great deal of patience, and a sense of humour. Past experience has shown that middle-aged married women are usually the best suited for these duties.

Considering the number of homes attended weekly, very few complaints are made against the helps, and any controversies are dealt with immediately.

There is a decline in the number of applications for jobs as home help, as a result of which we no longer have a waiting list. The service has not felt any adverse effect from this as the demand for extra help through the winter months has not been so great as in previous years, and many of our older cases have died.

Once again there is a decrease in the number of maternity cases assisted, in spite of the fact that people generally are earning more and also in spite of the fact that we are receiving more inquiries regarding this service.

The tuberculous patients have also benefited by the service with having excellent help to enable them to rest and be free from the worry of housework.

### Epileptics and Spastics.

Incidence :—

YEAR.	EPILEPTICS.		SPASTICS.	
	Male.	Female.	Male.	Female.
1951	1	—	—	1
1952	—	—	1	—
1953	3	2	2	3
1954	—	1	4	3
1955	2	1	4	4
Total number of cases in the Borough (age 0—15 years) known to the Medical Officer of Health at 31/12/55...	*9	4	*16	12

\* One Male included who is both Spastic and Epileptic.

It is not possible to give the precise number of persons suffering from epilepsy and cerebral palsy but, having regard to the information contained in Ministry of Health Circular 26/53, it is estimated that there may be up to 28 epileptics and possibly up to 50 spastics over the age of 15 years in the Borough. Other known details as at 31/12/55 are as follows :—

### **Spastics.**

Awaiting admission to special home	...	...	...	1 female.
Blind spastic	...	...	...	1 female.

### **Partially Sighted Spastics.**

One schoolgirl, 12 years old, attending ordinary school for company only.

One boy, 5 years old, so far thought to be ineducable.

### **Epileptics.**

Maintained in colonies	...	...	...	5 males, 3 females.
Awaiting admission to colonies	...	...	...	Nil.
Maintained in Part III accommodation provided by the Council	...	...	...	0 males, 5 females.

Briefly, the facilities available under the local health services for the area are as follows :—

Diagnosis, treatment and assessment are available from general practitioners and hospitals. Children under 15 automatically come to the notice of the School Health Service, and this Service maintains close supervision over the cases and, where necessary, contacts general practitioners and the hospitals in cases of difficulty. Furthermore, there is a local arrangement whereby the School Health Service contacts the Welfare Department at least 12 months before the child reaches the age of 16 years, so that the Welfare Department is brought into the picture at an early age. Responsibility for the liaison between the School Health Service and the Welfare Department has been given to the Senior School Medical Officer, and this arrangement appears to be working quite satisfactorily. The main difficulty with the spastics lies in accommodation, and at the time of writing plans are afoot to see whether a small unit can be provided for those spastic children capable of benefiting from treatment and education.

There is excellent co-operation between the School Health Service and the pediatric services of the hospitals.

**Blind Welfare.**

The following information is supplied by Mr. L. W. Horton, Chief Executive Officer, Welfare Department.

Number of blind persons on register during 1954	...	...	...	273
New patients added to register during 1955	...	...	...	23
Transfers into the Borough from other areas	...	...	...	2
				—
Number of blind persons reported as having died	...	...	...	36
Transfers out of the Borough to other areas	...	...	...	5
				—
Number of blind persons on register during 1955	...	...	...	257
Number of children of school age included in above	...	...	...	2
Number of partially sighted persons on register during 1955	...	...	...	51

Details of blind persons on register are as follows:—

**Age Periods of Registered Blind Persons.**

Age.	0-	1-	2-	3-	4-	5-	11-	16-	21-	31-	40-	50-	60-	65-	70+	Total.
M.	—	—	1	—	—	1	—	1	5	4	10	12	9	11	58	112
F.	—	—	—	—	—	—	1	1	3	7	7	14	8	13	91	145
<b>TOTAL</b>	—	—	1	—	—	1	1	2	8	11	17	26	17	24	149	257

**Age at Onset of Blindness.**

Age.	0-	1-	2-	3-	4-	5-	11-	16-	21-	31-	40-	50-	60-	65-	70+	Un-known	Total.
M.	11	1	1	1	—	4	2	3	8	6	9	13	9	8	36	—	112
F.	14	—	—	—	—	10	4	1	2	2	14	17	13	13	55	—	145
<b>TOTAL</b>	25	1	1	1	—	14	6	4	10	8	23	30	22	21	91	—	257

## Children, Age under 16.

	Under 2.	Age 2-4.		Age 5-15.				TOTAL.
		Resident in/at	Educable.	In-educable.	Educable.	In Mental Hospitals or M.D. Institutions.	Ineducable.	
M.	—	—	—	—	Attending Nursery Schools or in Residential Homes.	—	—	2
F.	—	—	—	—	At Home or Elsewhere.	—	—	1
TOTAL	—	—	—	1	In Mental Hospitals or M.D. Institutions.	—	—	3
			At Home or Elsewhere.	At Home or Elsewhere.	Attending Schools.	Not at School.	In Mental Hospitals or M.D. Institutions.	At Home or elsewhere.

## Education, Training and Employment. Age Periods, 16 years and upwards.

Employed.					Under-going Training.		Unemployed.					(n)	(o)
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	
—	—	—	—	—	For Approved Home Workers.	For Sheltered Employment.	Trained but unemployed.	No Training but Trainable	No Training	Not available for employment.	Not Capable of Work.	Not Employed over 65.	GRAND TOTAL.
—	—	—	—	—	All Others not included in either (a) or (b).	For Open Employment.	For Open Employment.	For Sheltered Employment.	For Open Employment.	For Sheltered Employment.	For Open Employment.	For Open Employment.	110
—	21	21	21	21	TOTAL EMPLOYED.	—	—	—	—	—	—	—	144
—	6	6	—	2	No. of Women over 60 and Men over 65, who are employed included in (d).	For Open Employment.	For Open Employment.	For Open Employment.	For Open Employment.	For Open Employment.	For Open Employment.	For Open Employment.	20
—	27	27	27	2	For Sheltered Employment.	—	—	—	—	—	—	—	6
—	—	—	—	—	For Open Employment.	—	—	—	—	—	—	—	26
—	—	—	—	—	—	—	—	—	—	—	—	—	144, included in Col. (m).
AL	—	—	—	—	In Workshops for the Blind.	—	—	—	—	—	—	—	No. of Persons registered under the Disabled Persons (Employment) Act, 1944, included in Col. (m).

### **Occupations of Employed Blind Persons.**

	<i>Basket Workers.</i>	<i>Clerks and Typists.</i>	<i>Newsagent.</i>	<i>Factory Operatives.</i>	<i>Massage and Physio-Therapy.</i>	<i>Newsvendors.</i>	<i>Piano Tuners.</i>	<i>Packers.</i>	<i>Telephone Operators.</i>	<i>Other Open Employment.</i>	<i>Gardener.</i>	<i>Miscellaneous.</i>	<i>TOTAL.</i>
Within Workshops for the Blind	—	—	—	—	—	—	—	—	—	—	—	—	—
In Approved Home Workers Schemes ... ... ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Others not Pastime Workers ...	1	2	1	—	1	1	1	—	2	16	1	1	27
<b>TOTAL</b> ... ... ...	1	2	1	—	1	1	1	—	2	16	1	1	27

**Physically and Mentally Defective and Mentally Disordered—All Ages.**

	<i>(a)</i> <i>Mentally Disordered.</i>	<i>(b)</i> <i>Mentally Defective.</i>	<i>(c)</i> <i>Physically Defective.</i>	<i>(d)</i> <i>Deaf without Speech.</i>	<i>(e)</i> <i>Deaf with Speech.</i>	<i>(f)</i> <i>Hard of Hearing.</i>	<i>Not included in (a) to (f) but combination of :—</i>							
M. ...	5	1	6	—	1	11	(b), (c) and (f)	—	TOTAL.					
F. ...	4	—	15	—	3	15	(a) and (c)	1	—	(a) and (e)	1	—	1	25
<b>TOTAL ...</b>	<b>9</b>	<b>1</b>	<b>21</b>	<b>—</b>	<b>3</b>	<b>26</b>	<b>(a) and (f)</b>	<b>1</b>	<b>1</b>	<b>(a) and (f)</b>	<b>1</b>	<b>—</b>	<b>1</b>	<b>63</b>

**Blind Persons age 16 and upwards—resident in**

	<i>Residential Accommodation provided under Part III of the 1948 Act, viz.: Section 21.</i>		<i>Other Residential Homes.</i>	<i>Mental Hospitals.</i>	<i>Mental Deficiency Institutions</i>	<i>Chronic Wards of Hospitals.</i>
	<i>Homes for the Blind.</i>	<i>Other Homes.</i>				
M. ...	—	14	—	6	—	3
F. ...	—	4	2	5	—	6
<b>TOTAL ...</b>	<b>—</b>	<b>18</b>	<b>2</b>	<b>11</b>	<b>—</b>	<b>9</b>

**Miscellaneous Information—Number of**

Social Centres ...	...	...	...	...	...	1
Handicraft Classes ...	...	...	...	...	...	2
Special Classes and Socials for the Deaf-Blind ...						—
Persons newly employed in open industry during the year ...	...	...	...	...	...	1
Persons discharged from open industry during the year ...	...	...	...	...	...	—
St. Dunstaners ...	...	...	...	...	...	6

**Blind Persons Registered as New Cases (not transfers) during the Year—  
Age Periods.**

	0-	1-	2-	3-	4-	5-	11-	16-	21-	31-	40-	50-	60-	65-	70+	Total.
M. —	—	—	—	—	—	—	—	—	—	—	1	—	—	—	10	11
F. —	—	—	—	—	—	—	—	—	—	—	2	2	—	—	8	12
<b>TOTAL</b> —	—	—	—	—	—	—	—	—	—	—	1	2	2	—	18	23

**Blind Persons Registered as New Cases (not transfers) during the Year—  
Age at Onset of Blindness.**

	0-	1-	2-	3-	4-	5-	11-	16-	21-	31-	40-	50-	60-	65-	75+	Total
M.	—	—	—	—	—	—	—	—	—	—	1	—	—	—	10	11
F.	—	—	—	—	—	—	—	—	—	—	—	2	2	—	8	12
<b>TOTAL</b>	—	—	—	—	—	—	—	—	—	—	1	2	2	—	18	23

The Local Authority employs three visitors and teachers of the blind, all holding the qualifications of the Association of Colleges for Teachers of the Blind.

Every effort is made to discover and assist any new cases of blindness. Home visiting and practical help is given to all blind persons known to us and residing within the Borough. Social amenities are made known and used whenever possible. Extra attention is given to the deaf-blind and any who may be suffering from some other form of handicap the nature of which is such as to increase the disability of blindness. For a small charge a home help is provided where necessary. Arrangements are also made for the provision, licensing and maintenance of wireless sets, and also the provision of dog licences and omnibus passes.

Each Tuesday and Thursday afternoon is devoted to work at the Social Centre, Guildhall, Market Place, where instruction is given in pastime occupations, or a game of dominoes, cards or draughts may be enjoyed.

The additional room at the Centre is light and warm and contains a number of easy chairs. Here, with this added comfort, our older people spend many happy hours, and each Wednesday afternoon is devoted to a quiet session where our people are at liberty to call in for a rest and chat if they so desire, while on Thursday afternoons a reader, kindly recruited by the W.V.S., comes along to give a short session of interesting stories. An instruction class in Old Tyme Dancing is held on alternate Thursdays.

Teaching of the following subjects and handicrafts is carried out by the staff: Braille reading and writing, Moon reading, sea-grass seating, rush seating, cane seating, rug making, hand knitting, bead work, chain ball craft, etc.

Theatre parties and amateur shows are arranged throughout the year. Motor coach outings are arranged throughout the summer. The two most important events of the year are the annual outing and Christmas party which are provided by the Local Authority.

A new introduction to the Welfare Scheme is the provision for an annual summer holiday of one week, which is taken collectively and under the supervision of the Blind Welfare staff. In this way much pleasure has been given to many people who would otherwise never have left their home town, and as half the cost is borne by the Welfare Committee and the other half by the blind person, the charge is definitely within the reach of all concerned.

Another additional service for the blind takes the form of a monthly Chiropody Clinic, which is held at our Social Centre on the chosen day from 9.0 a.m. to 5.0 p.m. The Chiropodist attending allows approximately half an hour for each patient, and the sessions are always fully booked. A charge of 3/6 per person covers any treatment that may be considered necessary at the time of appointment.

Registration of blind persons is carried out through the medium of a private Eye Clinic, which is arranged once monthly in conjunction with the Ophthalmologist, and which is in accordance with the Ministry of Health requirements, Form B.D. 8 being completed in all cases. In the case of bedridden patients, and others so physically handicapped as to be unable to attend the clinic in person, arrangements are made for the Ophthalmologist to visit them in their homes.

Records are now kept of all observation cases, i.e., persons likely to go blind within the next four years following the date of examination.

The many demands in the field of Blind Welfare seem to be ever increasing and some of our duties must be left with seemingly insufficient attention, but we are, nevertheless, happy to report that despite the many office and routine tasks which must be carried out, we were able to make a large number of visits. These include visits to blind persons in their homes, visits to various hospitals, and numerous appointments with doctors and dentists on behalf of blind persons.

#### **Follow-up of Registered Blind and Partially Sighted Cases.**

(i) Number of cases registered during the year in respect of which para. 7 (c) of Forms B.D.8 recommends :—	Cause of Disability.			
	Cataract.	Glaucoma.	Retrobulbar Fibroplasia.	Other.
(a) No treatment :—9      ...      ...	2	3	—	4
(b) Treatment (medical, surgical or optical) :—25      ...      ...	7	6	—	12
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment      ...      ...      ...	—	5	—	9

## Section 47, National Assistance (Amendment) Act, 1951.

Three cases were admitted to Manor Hospital under this Section.

### Ambulance Service.

Mr. A. Connor, Transport Manager, reports as follows:—

### Use of Service.

The increase noted last year in the number of out-patients has continued, though after March the rate of increase was somewhat less, and the total number of patients carried was 8.1% above that for 1954. Journeys outside the Borough showed a small decrease in both number and average mileage.

With the help of radio control, in its first full year, it was possible to reduce the mileage by 4.6% in spite of the greater number of cases.

### Vehicles.

The Transport Department's central workshops continue to maintain and repair these and, during the year, built a large-capacity body for sitting-cases on an Austin chassis. With another of the same type in construction at the year end, it will be possible to reduce the fleet by two, leaving nine ambulances and five cars for sitting patients.

### Personnel.

The staff comprises a Deputy Ambulance Officer, three shift leaders and twenty-four driver-attendants.

### Patients Carried.

			<i>Ambulances.</i>	<i>Cars.</i>	<i>Total.</i>
Emergency calls	...	...	1,257	147	1,404
Other cases	...	...	23,751	22,341	46,092
<b>Total</b>	<b>...</b>	<b>...</b>	<b>25,008</b>	<b>22,488</b>	<b>47,496</b>

**Mileage.**

		<i>Ambulances.</i>	<i>Cars,</i>	<i>Total.</i>
With patients	...	93,349	84,176	177,525
Midwifery apparatus, etc.	...	233	1,978	2,211
Other journeys (inc. fruitless)	...	2,167	2,584	4,751
		<hr/>	<hr/>	<hr/>
		95,749	88,738	184,487
		<hr/>	<hr/>	<hr/>

**Co-operation, etc.**

Co-operation with the hospitals, railway authorities and other ambulance services continues to be satisfactory, and during 1955 it was possible to provide train or bus transport for 140 patients travelling to distant points, and make arrangements to have them met at the end of the journey and conveyed to their destinations.

## X.—SANITARY CIRCUMSTANCES AND FOOD INSPECTION.

BY

MR. S. PRIME, CHIEF SANITARY INSPECTOR.

### **HOUSING.**

The survey of the housing conditions in the Borough which was started in 1954 under the provisions of the Housing Repairs and Rents Act was continued during the year under review. In the first place the survey was carried out in some detail but, later on, owing to the continued shortage of staff coupled with the fact that the Minister of Housing and Local Government did not consider it necessary to agree to the Council's application for an extension of the period of time allowed for the submission of the Section 1 proposals, the survey had to be skipped over in the finishing stages and consequently, instead of being able to establish the number of unfit houses in the Borough with some exactness as we had hoped to do, it is to be regretted that the final number had to be arrived at by doing a certain amount of estimating. While a broad estimate sufficed the Minister's requirements, it would have been undoubtedly more satisfactory from the Council's point of view to have completed the work in detail in order to know the actual extent of rehousing that would be needed, particularly in face of the fact that all available building land in the Borough has been used up.

The form of proposal was laid down in Circular 55/54 of the Ministry of Housing and Local Government and the actual proposals are shown below :—

#### **“PART 1. THE TOTAL PROBLEM.**

<ul style="list-style-type: none"> <li>(i) Estimated number of houses unfit for human habitation within the meaning of section 9 of the Housing Repairs and Rents Act, 1954, and suitable for action under section 11 or section 25 of the Housing Act, 1936 ... ... ...</li> </ul>	1,500
<ul style="list-style-type: none"> <li>(ii) Period in years which the Council think necessary for securing the demolition of all the houses in (i) ... ... ... ... ...</li> </ul>	8 years.

## "PART 2. ORDERS ALREADY MADE, ETC.

(iii) Number of houses in (i) in clearance areas and already covered by operative clearance or compulsory purchase orders or owned by the local authority ... ... ... ... Nil.

(iv) Number of houses which are already in clearance areas and for which clearance or compulsory purchase orders have been submitted to the Minister but have not yet become operative ... ... ... ... Nil.

## "PART 3. ACTION IN THE FIRST FIVE YEARS.

(v) Number of houses which are already in clearance areas and for which clearance or compulsory purchase orders are to be made or which are to be purchased by agreement within the five years ... ... ... Nil.

(vi) Number of houses which are to be included in clearance areas still to be declared and which within the five years will be owned by the local authority or will have been included in a clearance order or a compulsory purchase order submitted to the Minister ... ... ... 750

(vii) Number of houses under (iii), (iv), (v) and (vi) to be patched (if necessary) and retained within the five years under section 2 of the Housing Repairs and Rents Act, 1954, for temporary accommodation ... ... ... ... 150

(viii) Number of houses under (iii), (iv), (v) and (vi) to be demolished in the five years ... ... 600

(ix) Number of houses (including those already comprised in operative demolition orders) to be demolished in the five years as a result of action under section 11 of the Housing Act, 1936 ... ... ... ... 150"

The number of dwelling houses on which individual representations were made is considerably down on the previous year's figure, but this was due to the great amount of time which had to be spent by the staff on the survey. Those that were dealt with were represented on the grounds of urgency. Work on the proposed Slum Clearance Programme was commenced, however, just before the end of the year, after the survey had been completed and three clearance areas, containing a total of 48 houses occupied by 258 persons, were represented to the Health Committee. In the coming year it is intended to submit proposals for several clearance areas involving some 140 houses and also to represent approximately 90 houses under Section 11 individually.

Under the provisions of the Housing Repairs and Rents Act, 1954, 71 Certificates of Disrepair were granted and 26 were revoked during the year.

### **Housing Act, 1936, Section 11.**

Number of dwelling houses for which Official Representations were made ...	...	...	...	...	...	...	...	7
Number of houses for which Demolition Orders were served	...							14
Number of families re-housed	...	...	...	...	...	...		32
Number of houses demolished	...	...	...	...	...	...		46

Local Government (Miscellaneous Provisions) Act, 1953, Section 10.

Number of dwelling houses for which Official Representations were made ... ... ... ... ... ... ... ... ...	5
Number of houses for which Closing Orders were served ...	6

The following information is supplied by Mr. J. P. Moyle, Estates and Housing Director:—

(a)	Number of houses owned by the Local Authority on a weekly rental ... ... ... ... ... ... ... ... ...	12,801
	Being purchased on the instalment system ... ... ...	—
(b)	1. Held under Part III of the Housing Act, 1925 ...	10,513
	2. Held under Part II of the Housing Act, 1925 ...	1,248
	3. Held under other powers—Housing Act, 1919 ... Housing Act, 1923 ...	709 ... 187
		Other Acts. Non-Assisted ...
		144

(c) Houses built in the last two years :—					
1. Held under Part III of the Housing Act, 1925—					
	Built during 1954	...	...	934	
	Built during 1955	...	...	766	
2. Held under Part II of the Housing Act, 1925—					
	Built during 1954	...	...		
	Built during 1955	...	...		
3. Held under other powers	...	...	...	...	

### **Number of New Houses erected during the Year 1955.**

(a) Total including numbers given separately at (b) :—							
1. By the Local Authority	...	...	...	...	...	...	766
2. By other Local Authorities	...	...	...	...	...	—	—
3. By other bodies and persons	...	...	...	...	...	—	—
(b) With State Assistance under the Housing Acts :—							
1. By the Local Authority	...	...	...	...	...	...	766
(a) For the purpose of Part II of the Act of 1925	...	—					—
(b) For the purpose of Part III of the Act of 1925	...	—					766
(c) For other purposes	...	...	...	...	...	—	—
2. By other bodies or persons	...	...	...	...	...	—	—

**Houses Allocated during the Year for the following purposes.**

## **INSPECTIONS AND NOTICES.**

The Department received 1,315 complaints during the year, chiefly relating to housing disrepair.

3,544 visits and inspections were made and particulars of the work that has been carried out in compliance with Preliminary and Statutory Notices under the provisions of the Public Health Act are contained in the following table :—

## Dwelling Houses.

Roofs	...	...	Stripped and re-slated	...	...	...	13
			Repaired	...	...	...	94
Chimney stacks	...	Rebuilt	...	...	...	...	3
		Repaired	...	...	...	...	11
		Pots renewed	...	...	...	...	7
Eavesgutters	...	Renewed	...	...	...	...	4
		Repaired	...	...	...	...	27
Rainwater pipes	...	Provided	...	...	...	...	2
		Renewed	...	...	...	...	7
		Repaired	...	...	...	...	17

Walls	...	...	Rebuilt	...	...	...	...	...	2
			Repaired	...	...	...	...	...	3
Plaster	...	...	Ceilings renewed	...	...	...	...	...	1
			Ceilings repaired	...	...	...	...	...	22
			Walls plastered	...	...	...	...	...	21
Floors	...	...	Relaid	...	...	...	...	...	7
			Repaired	...	...	...	...	...	6
Stairs	...	...	Repaired	...	...	...	...	...	1
Firegrates	...	...	Renewed	...	...	...	...	...	8
			Repaired	...	...	...	...	...	6
			Domestic smoke nuisances abated	...	...	...	...	...	1
Windows	...	...	Renewed	...	...	...	...	...	5
			Repaired	...	...	...	...	...	20
			Sashcords renewed	...	...	...	...	...	18
Water supply	...		Fittings repaired or renewed	...	...	...	...	...	8
Sinks	...	...	Renewed	...	...	...	...	...	4
Waste pipes	...	...	Renewed	...	...	...	...	...	2
			Repaired	...	...	...	...	...	7
Drains	...	...	Provided	...	...	...	...	...	7
			Reconstructed	...	...	...	...	...	3
			Repaired	...	...	...	...	...	9
			Cleansed	...	...	...	...	...	118
			Manholes provided	...	...	...	...	...	4
			Soil pipes provided	...	...	...	...	...	4
			Soil pipes renewed or repaired	...	...	...	...	...	2
			Ventilation shafts renewed or repaired	...	...	...	...	...	3
			Inspection chamber covers renewed	...	...	...	...	...	6
Sewers	...	...	Reconstructed	...	...	...	...	...	15
Water closets	...		Additional provided	...	...	...	...	...	2
			W.C. structures repaired	...	...	...	...	...	10
			Fittings renewed	...	...	...	...	...	44
			Fittings repaired	...	...	...	...	...	86
Paving	...	...	Yard surfaces repaired	...	...	...	...	...	1
Dust bins	...	...	Provided	...	...	...	...	...	5
Offensive accumulations removed			...	...	...	...	...	...	1

## COMMON LODGING HOUSES.

Number on Register	...	...	...	...	...	...	...	3
Number of rooms registered for sleeping	...	...	...	...	...	...	...	38
Number of lodgers provided for	...	...	...	...	...	...	...	267

These premises have been regularly inspected throughout the year and they are being maintained in a satisfactory condition.

## OFFENSIVE TRADES.

The following offensive trades are carried on in the Borough:—

Fat Extractor	...	...	...	...	1
Fat Melter	...	...	...	...	1
Fellmonger	...	...	...	...	1
Gut Scraper	...	...	...	...	1
Rag and Bone Dealer	...	...	...	...	4
Soap Boiler	...	...	...	...	1
Tripe Boiler	...	...	...	...	2

During the summer months a number of complaints were made to the Department about unpleasant smells emanating from one of the fat extracting and melting trade premises and to which a considerable amount of publicity was given in the local press. The smell was largely the result of the excessively hot weather, which rapidly reduced fats and animal by-products to an offensive state before they arrived at the factory for processing. Unfortunately the factory is not large enough to house the most modern processing plant, and also because of its siting the matter was one which could not be readily solved. The question of installing an air extracting and washing plant was considered, but the estimated cost was too great taking into account the fact that the factory is only held on a short-term lease. Certain measures were, however, taken to reduce the smell as much as possible, but the real and lasting cure for the problem is a new specially designed factory suitable for this class of trade and equipped with modern plant. This is a planning and development matter which is now being considered, but owing to the practical and financial problems involved it will be some time before the scheme can be put into operation.

## ATMOSPHERIC POLLUTION.

Owing to the continued shortage of staff only a very little time has been given to the problems of atmospheric pollution, and no routine smoke observations have been made. Some advance has, however, been made on schemes that were already planned towards cleaner air. It was mentioned in the report last year that one of the foundries in the Borough, which is probably the largest of its particular kind in Europe, had made a long-term plan of re-development which included the installation of electric annealing ovens to replace pulverised coal fired ovens. A further stage of this part of the re-development plan has been completed by putting into operation a second pair of electric ovens. The construction of a mechanised foundry has also been started which will incorporate a new electric melting process. At the same time the foundry are embarking on experiments with the use of auxiliary oil burners to assist in lighting up the furnaces.

A wet dynamic dust collector known as an "Air Tumbler", which separates dust from air by centrifugal action, while water wets and extracts the dust, has been installed at a metal recovery and refining works. It is believed that this is the first dust collector of its kind to be used in this country for this process. Although several adjustments have been found necessary, it will undoubtedly show eventually a very high collecting efficiency. This plant was put in following several discussions we had with the Directors of the firm in question about the excessive amount of smoke being discharged from the melting furnaces direct to atmosphere.

The year also saw the elimination of excessive quantities of dense black smoke which was previously being discharged from the boiler-house chimney at a local hospital. This had been polluting the atmosphere for a long while, and from time to time representations had been made to the Hospital Management Committee. It is, therefore, with very great satisfaction that I am able to report that an entirely new boiler-house has now been built which is equipped with three economic boilers, automatic stokers and all necessary recording instruments.

These are the major improvements which have been carried out in the Borough during the year towards cleaner air and, having regard to the large amount of money which has been spent in carrying them out. I think progress can be said to have been satisfactory.

The Clean Air Bill is now about to be placed on the Statute Book, but it should be said that it can only be implemented if we are able to make up our staff shortage.

## FACTORIES ACTS, 1937 and 1948.

There are 635 mechanical and 69 non-mechanical factories, including bakehouses, at present on the Register.

A summary of the particulars in compliance with Section 128 of the Factories Act, 1937, is shown in the following tables:—

**Inspections.**—Inspections made by Sanitary Inspectors.

Premises	Number of		
	Inspections	Written Notices	Prosecutions
Factories without mechanical power ... ...	—	—	—
Factories with mechanical power ... ...	8	2	—
Other premises under the Act (including works of building and engineering construction but not including out-workers' premises) ...	—	—	—
<b>TOTAL</b> ... ... ...	<b>8</b>	<b>2</b>	—

## Defects Found.

Particulars	Number of Defects				Number of Prosecutions	
	Found	Remedied	Referred			
			To H.M. Insp.	By H.M. Insp.		
Want of cleanliness ... ... ...	—	—	—	—	—	
Overcrowding ... ... ...	—	—	—	—	—	
Unreasonable temperature ... ...	—	—	—	—	—	
Inadequate ventilation ... ...	—	—	—	—	—	
Ineffective drainage of floors ... ...	—	—	—	—	—	
Sanitary Conveniences—						
(a) insufficient ... ... ...	—	—	—	—	—	
(b) unsuitable or defective ...	3	2	—	2	—	
(c) not separate for sexes... ...	—	—	—	—	—	
Other offences against the Act (not including offences relating to out-work) ... ... ...	—	—	—	—	—	
<b>TOTAL</b> ... ... ...	<b>3</b>	<b>2</b>	—	<b>2</b>	—	

## SEWERAGE.

The following information is supplied by Mr. M. L. Francis, Borough Engineer and Surveyor:—

### **New Sewers laid during the year.**

## Osmaston Park Industrial Estate:

15" to 9" Foul Sewers ... ... ... ... 1,061 yards.  
 42" to 9" Surface Water Sewers ... ... ... 1,159 ..

### Chellaston Housing Site—Cranford Close:

9" Combined Sewers ... ... ... ... 47

### Kingsway Housing Site:

9" Foul Sewer ... ... ... ... 122 ,,  
 9" Surface Water Sewer ... ... ... ... 219½ ,,

### Sinfin Housing Site :

9" Combined Sewer ... ... ... ... 116 ..

### Sinfin Relief Sewer (Victory Road Drainage):

24" to 12" Combined Sewer	...	...	...	470	,,
18" to 12" Surface Water Sewer	...	...	...	632½	,,

### **Manholes constructed during the year.**

Osmaston Park Industrial Estate	...	...	...	...	13	Double.
Chellaston Housing Site—Cranford Close	...	...	...	...	8	Single.
Kingsway Housing Site	...	...	...	...	2	
Sinfin Housing Site	...	...	...	...	9	
Sinfin Relief Sewer (Victory Road Drainage)	...	...	...	...	3	
Mayfield Road	...	...	...	...	13	
Litchurch Gas Works	...	...	...	...	1	
Thornhill Road	...	...	...	...	1	
Northern Intercepting Sewer (Storer's Yard)	...	...	...	...	1	

#### **Sewers cleaned out during the year.**

The total length of sewers cleaned out represents 5,970 yards.

### Manholes cleaned out during the year

232

## WATER SUPPLY.

The following information is supplied by Mr. I. G. Edwards, Water Engineer :—

The water supplied to the area has been satisfactory in quality and quantity.

Regular examination is made of the raw water and of the water going into supply. As all water is treated, the majority of samples are taken after treatment. A total of 562 bacteriological, 89 chemical and 577 pH and hardness samples were taken, both at the Works and from various points in the area of supply. The results of a chemical analysis are attached hereto.

Only that proportion of the supply obtained from the Derwent Valley Water Board is liable to plumbo-solvent action. Under the Derwent Valley Water Act, 1899, water supplied by the Board is required to be treated by them for the prevention of such action before the water is delivered to any of the constituent Undertakings.

All water is chlorinated before being passed into supply.

There is no record of the proportion of dwelling houses supplied by means of standpipes, but the figure is negligible, and it can be said that substantially the whole of the dwelling houses, of which there are 43,100 in the Borough, are supplied with water by the Undertaking.

### Example of recent chemical analysis of water supplied to the area.

pH Value	..	..	..	..	..	..	..	..	8.05
									<i>Parts per Million.</i>
Total Solid Matter (dried at 180° C.)	..	..	..	..	..	..	..	..	140
Free and Saline Ammonia	..	..	..	..	..	..	..	..	0.008
Albuminoid Ammonia	..	..	..	..	..	..	..	..	0.04
Nitrogen as Nitrites	..	..	..	..	..	..	..	..	0
Nitrogen as Nitrates	..	..	..	..	..	..	..	..	0
Chlorine (present as Chloride)	..	..	..	..	..	..	..	..	23
Oxygen absorbed in four hours at 80° F.	..	..	..	..	..	..	..	..	0.34
Hardness—Temporary	..	..	..	..	..	..	..	..	35
—Permanent	..	..	..	..	..	..	..	..	45
—Total	..	..	..	..	..	..	..	..	80
Metals—Iron	..	..	..	..	..	..	..	..	0.24
Available Chlorine	..	..	..	..	..	..	..	..	0.08

(Signed) R. W. SUTTON,

*Borough Analyst.*

**Supply.**

Number of gallons of water supplied to Derby Water Area from Public Supply	...	...	...	...	3,608,174,000
Number of gallons per day per head of population	...				48.31
Percentage of total quantity from Derwent Valley Supply					70%

**Used during the year.**

						<i>Gallons.</i>
Sewer flushing	...	...	...	...	...	213,000
Street watering	...	...	...	...	...	583,000
Steam rolling	...	...	...	...	...	10,000

**REFUSE COLLECTION AND DISPOSAL.**

The following information is supplied by Mr. A. Connor, Director of Public Cleansing.

**Refuse Collection.**

House and Trade Refuse collected	...	...	...	37,927	tons.
Nightsoil	...	...	...	10	"
Trade Refuse delivered by tradesmen	...	...	...	8,540	"
<b>Total</b>	<b>...</b>	<b>...</b>	<b>...</b>	<b>46,477</b>	<b>tons.</b>

**Refuse Disposal.**

Refuse Disposal Works	...	...	...	...	4,930	tons.
Controlled Tipping—Alvaston Tip	...	...	...	...	41,547	"
<b>Total</b>	<b>...</b>	<b>...</b>	<b>...</b>	<b>...</b>	<b>46,477</b>	<b>tons.</b>

**Extracted from Refuse and Sold.**

Tins	...	...	148	tons.	Textiles	...	...	38	tons.
Iron	...	...	3	"	Cinders	...	...	248	"
Waste Paper	...	570	"		Food Waste (Raw)			96	"

**Moveable Ashbins provided.**

Housing Committee	...	...	...	...	...	...	1,870
Private Owners	...	...	...	...	...	...	441
							<hr/>
				Total	...	...	2,311

Number of cats, dogs, etc., disposed of	...	...	...	1,852
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**Power Vehicles utilised for Cleansing Purposes.**

1. Collection of Refuse and Salvage	...	...	...	18
2. Street Cleansing and Watering :—				
Petrol Motor	...	...	...	1
Mechanical Gully Emptiers	...	...	...	2
Street Sweepers and Sweeper-collectors	...	...	...	4
Street Washing Machine	...	...	...	1

**Rodent Control.**

The Prevention of Damage by Pests Act, 1949, makes it the duty of every local authority to take such steps as may be necessary to secure, so far as practicable, that their district is kept free from rats and mice. There is also an obligation of occupiers of land to notify the local authority of any substantial numbers of rats or mice. Although this notification is required by occupiers, some do not notify the local authority, but try to rid the infestation themselves. Their efforts are often ineffective, however, because rats and mice do not always keep their activities to individual premises and such infestations which involve more than one establishment can only be completely cleared by the local authority making a survey and treating the premises as a whole. All poison treatments are followed by post-baiting and re-visits to determine its effectiveness, and this is continued until there is no further evidence of infestation.

The Rodent Control Officer and his staff dealt with 587 infestations of rats and mice at dwelling houses, 214 at business premises and 83 at Corporation surface properties, that is, dostructor works, sewage works, markets and schools. Twenty groups of buildings were also surveyed and treated and four infestations were dealt with at agricultural properties. In carrying out this work, 8,286 visits were made.

The number of business and trades people using the Rodent Control services of the Department has increased each year since the Act came into operation. An inclusive charge of 6/- per hour is made for servicing business premises, and where it is necessary to carry out block treatment of a number of premises the cost is charged to the occupiers approximately on the basis of the extent of the infestation at the individual premises. The increased use of the Rodent Control services for which these charges are made is shown by the following amounts which have been recovered over the past five years :—

1951	...	...	£351	12	0
1952	...	...	372	14	6
1953	...	...	394	0	0
1954	...	...	473	0	0
1955	...	...	602	15	6

### **Sewer Maintenance Treatment.**

Test baiting and the half-yearly maintenance treatment of the Borough sewerage system was completed and, in conjunction with the sewer maintenance, a baiting and poison treatment was carried out in the culvert under Victoria Street. The following tables show the results of the work :—

Test Baiting	Number of Manholes	Maintenance Treatment No. 1				Maintenance Treatment No. 2														
		Number of Manholes		Number of Manholes		Number of Manholes		Number of Manholes												
		Test Baited	No take	1st day	2nd day	1st day	2nd day	1st day	2nd day											
Osmaston	Ward...	26	5	19	66	13	5	48	19	55	13	4	38	14	3	38	20	20		
Alvaston	"	35	7	1	27	81	13	7	61	20	50	11	3	36	11	3	36	17	17	
Pear Tree	"	20	6	1	13	70	10	6	54	16	43	12	3	28	13	2	28	15	15	
Arboretum	"	5	1	1	3	33	10	-	23	10	33	7	6	20	6	7	20	15	15	
Normanton	"	22	7	-	30	44	18	6	20	19	7	18	8	26	21	5	26	30	30	
Litchurch	"	22	7	-	7	70	15	3	52	14	4	52	27	4	21	20	4	28	35	
Dale	"	22	7	-	8	21	55	6	43	13	8	34	21	12	5	25	13	5	24	
Babington	"	22	7	-	8	70	13	2	55	13	2	55	17	50	18	11	21	26	4	
Castle	"	22	7	-	4	2	9	62	29	12	21	31	9	22	41	65	25	21	29	
Abbey	"	22	10	1	-	9	28	8	3	17	11	6	11	17	38	8	2	28	15	
Rowditch	"	25	6	3	16	59	19	6	34	21	6	32	27	45	13	2	30	12	2	
King's Mead	"	15	7	-	8	70	17	2	51	18	1	51	19	55	18	1	36	16	3	
Bridge	"	20	8	1	11	102	22	3	77	23	5	74	28	56	25	-	31	14	11	
Friar Gate	"	15	2	1	12	31	7	3	21	10	-	21	10	32	9	2	21	8	2	
Derwent	"	55	4	1	50	50	5	-	45	4	1	45	5	50	17	3	30	17	30	
Becket	"	20	5	2	13	88	11	13	64	11	13	64	24	71	17	5	49	17	5	
Mackworth	"	35	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Victoria Street Culvert	"	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
<b>TOTALS</b>	...	387	79	17	291	1,023	226	88	709	244	90	689	338	829	270	90	469	265	87	477

## MEAT AND FOOD INSPECTION.

This has been the first full year of private slaughtering since 1939, and the personal experience of the Sanitary Inspectors, who are responsible for carrying out the duties of meat inspection, has been that the quality of the animals sent in for slaughter has improved and that the improvement is largely through the efforts which the butchers in Derby have made to provide the public with the best quality meat available. There is a striking reduction in the percentage figures of carcases and parts of carcases of all classes of animals which have been condemned as compared with 1953, the last full year of Government control. These figures in isolation cannot, of course, be taken as necessarily indicative of a similar fall in the incidence of disease in food animals generally, although in the case of tuberculosis there has been a gradual decline over the past few years.

The termination early in the year of the private lettings system at the Corporation Abattoir, and the introduction of fixed hours of opening on a public abattoir basis, was a step which the Public Health Department had advocated for a long time, and the new system contributed in no small way to the maintenance of a 100% meat inspection service, despite the serious staff shortage.

There has been a considerable number of animals sent in for slaughter under the Tuberculosis (Slaughter of Reactors) Order which became operative in the latter half of 1954. Actual figures are:—

Bulls	...	...	...	...	...	3
Other cattle, excluding cows					...	29
Cows	...	...	...	...	...	105
Calves	...	...	...	...	...	8

11 cows were also slaughtered under the Tuberculosis Order, 1938.

## Carcases Inspected and Carcasses Condemned during 1955.

	Cattle excluding Cows.	Cows.	Calves.	Sheep and Lambs.	Pigs.
Number Killed .. .. ..	7,348	3,613	1,347	23,678	40,238
Number Inspected .. ..	7,348	3,613	1,347	23,678	40,238
<i>All Diseases except Tuberculosis :</i>					
Whole carcasses condemned ..	4	11	45	35	17
Carcases of which some part or organ was condemned ..	1,108	530	7	790	722
Percentage of the number in- spected affected with disease other than tuberculosis ..	15.01	14.97	3.86	3.48	1.83
<i>Tuberculosis only :</i>					
Whole carcasses condemned ..	24	31	8	—	17
Carcases of which some part or organ was condemned ..	833	865	8	—	1,175
Percentage of the number in- spected affected with tuber- culosis .. .. ..	11.66	24.80	1.11	—	2.96

Classification of Diseases other than Tuberculosis in whole carcasses and parts  
of carcasses condemned.

## Cattle.

	Totally Condemned.		Part Condemned.	
	Cattle excluding Cows.	Cows.	Cattle excluding Cows.	Cows.
Oedema .. .. ..	—	1	—	1
Oedema and Emaciation .. .. ..	1	4	—	—
Septic Metritis .. .. ..	—	2	—	—
Toxæmia .. .. ..	1	—	—	—
Anthrax .. .. ..	—	1	—	—
Infiltrations .. .. ..	—	—	—	1
Septicæmia .. .. ..	—	1	—	—
Septic Peritonitis .. .. ..	1	—	—	—
Abscess Adhesions .. .. ..	—	—	—	2
Acetonæmia .. .. ..	1	—	—	—
Peritonitis and Oedema .. .. ..	—	1	—	—
Cachexia .. .. ..	—	1	—	—
Injury and Bruising .. .. ..	—	—	22	10
Bone Taint .. .. ..	—	—	—	1
Prcsternal Calcification .. .. ..	—	—	1	—
Putrefaction .. .. ..	—	—	1	—
<b>TOTALS</b> .. .. ..	<b>4</b>	<b>11</b>	<b>24</b>	<b>15</b>

**Sheep.**

	<i>Totally Condemned.</i>	<i>Part Condemned.</i>
Oedema and Emaciation .. .. ..	24	4
Moribund .. .. ..	1	—
Pyæmia .. .. ..	2	—
Septic Mastitis .. .. ..	1	—
Septic Metritis .. .. ..	1	—
Pregnancy Toxæmia .. .. ..	4	—
Injury and Bruising .. .. ..	—	7
Moulds (Imported Meat) .. .. ..	1	—
Incipient Putrefaction .. .. ..	1	—
Calcification .. .. ..	—	1
Abscess Adhesions .. .. ..	—	14
Arthritis .. .. ..	—	4
 TOTALS .. .. ..	35	30

**Pigs.**

	<i>Totally Condemned.</i>	<i>Part Condemned.</i>
Moribund .. .. ..	5	—
Abscesses .. .. ..	—	1
Swine Fever .. .. ..	1	—
Oedema .. .. ..	3	—
Jaundice .. .. ..	1	—
Acute Swine Erysipelas .. .. ..	2	—
Septic Pleurisy and Peritonitis .. .. ..	1	—
Osteomalacia .. .. ..	—	18
Extensive Suppurative Injuries .. .. ..	1	1
Lymphatic Leukæmia .. .. ..	1	—
Abscess Adhesions .. .. ..	—	2
Arthritis .. .. ..	—	91
Putrefaction .. .. ..	2	—
Injury and Bruising .. .. ..	—	37
Urticaria .. .. ..	—	1
 TOTALS .. .. ..	17	151

**Calves.**

			<i>Totally Condemned.</i>	<i>Part Condemned.</i>
Medicinal Odour	..	..	1	—
Immaturity	..	..	28	—
Moribund	..	..	1	—
Umbilical Pyæmia	..	..	1	—
Emaciation	..	..	2	—
Pneumonia	..	..	1	—
Hyperæmia	..	..	1	—
Oedema	..	..	—	3
Jaundice	..	..	2	—
Joint-ill	..	..	8	—
Arthritis	..	..	—	1
<b>TOTALS</b>	..	..	<b>45</b>	<b>4</b>

**Weight of Meat Condemned.**

		<i>Tons.</i>	<i>cwts.</i>	<i>qrs.</i>	<i>lbs.</i>
Beef	..	22	16	3	25
Mutton	..	—	15	0	22
Pork	..	2	16	1	6
Veal	..	—	17	1	4
Offal	..	42	18	2	10
<b>TOTAL</b>	..	<b>70</b>	<b>4</b>	<b>1</b>	<b>11</b>

All condemned meat and offal is processed for industrial purposes at local premises.

**SLAUGHTER OF ANIMALS ACTS, 1933 to 1954.**

Particular attention is given at all slaughterhouses to ensure that all animals are handled and slaughtered in a humane manner. Stunning is carried out by the captive bolt pistol or the electrical method.

**LICENSED SLAUGHTERMEN.**

New licences granted during 1955	...	...	5
Licences renewed during 1955	...	...	66
Licensed in operation at end of the year	...	...	71

**GENERAL FOOD INSPECTION.**

The wholesale provision stores and the wholesale fish and fruit markets have been regularly inspected throughout the year. The following statement shows the foodstuffs condemned as unfit for human consumption.

Quantity.					
		Tons.	cwts.	qrs.	lbs.
Imported chilled beef	..	—	2	—	5
,, frozen beef	..	—	4	—	7
,, „ minced					
,, „ beef	..	1	3	—	4
,, „ lamb	..	—	—	1	8
,, „ offal	..	—	2	—	20
Cooked meats	..	—	—	3	6
Corned beef	..	—	—	2	8
Tongue	..	—	—	—	27
Bacon and ham	..	—	11	—	1
Sausages	..	—	3	—	8
Black puddings	..	—	—	—	24
Fish cakes	..	—	—	—	16
Frozen eggs	..	—	5	—	12
Cheese	..	3	6	—	—
Butter	..	—	—	—	9
Cereals	..	—	—	—	7
Confectionery	..	—	1	—	2
Grapes	..	—	—	1	26
Cherries	..	—	6	1	20
Apples	..	—	2	3	12
Bananas	..	—	2	2	16
Fruit pulp	..	—	1	—	18
Raisins	..	1	2	1	10
Mushrooms	..	—	1	—	8
Potatoes	..	—	15	—	—
Miscellaneous items	..	—	—	—	9
Meat pies	..	..	..	..	13½ dozen.
Sandwich rolls	..	..	..	..	6 „
Canned foods	..	..	..	..	4,738 cans.

### Legal Proceedings taken during the Year ending December, 1955.

Date.	Offence.	Result.
19/5/55	Selling milk which contained 9% added water .. (Section 3 of the Food & Drugs Act, 1938).	Fined £10 0s. 0d. with £5 5s. 0d. costs.
19/5/55	Distributing milk in dirty bottles .. (Regulation 26 of the Milk & Dairies Regulations, 1949).	Fined £5 0s. 0d. on each of two charges.
29/8/55	Selling milk which contained 4%, 7%, 4%, 2%, 4% of added water. (Section 3 of the Food & Drugs Act, 1938).	Convicted and discharged on payment of costs of £2 6s. 0d. on each of five charges.
10/11/55	Selling milk in a bottle that had not been properly cleansed (Regulation 26 of the Milk & Dairies Regulations, 1949).	Fined £10 0s. 0d.
14/10/55	Selling milk in a bottle that had not been properly cleansed (Regulation 26 of the Milk & Dairies Regulations, 1949).	Fined £10 0s. 0d.

## FOOD AND DRUGS ACT, 1938.

### Inspection of Food Premises.

The number of premises registered for the preparation or manufacture of sausages or potted, pressed, pickled or preserved food under section 14 of the Food and Drugs Act, 1938, is as follows:—

Number of premises on Register at end of year ... ...	90
Number of premises registered during the year ... ...	2
Number of premises closed during the year ... ...	Nil

It is with deep feelings of frustration that I have to report yet again the impossibility of maintaining regular routine visits of inspection to the food premises in the Borough owing to the continued depletion of the staff. With our very much reduced number of Inspectors it was only possible to carry out inspection on a very limited scale, chiefly to individual premises as the need arose. From the little inspection carried out I regret to say that one fact stood clearly above all else, and that was the way in which some occupiers and staff in food preparing premises tend to deteriorate in their general food hygiene practices when regular routine inspection is not carried out. It is of great concern to Sanitary Inspectors that with the ever-increasing demands on their services and the apparent unlikelihood of any improvement in the acute staff shortage, that the near future has very little grounds for optimism in the matter of maintaining the standard of food hygiene which the public have a right to expect.

### MILK.

Regular analytical and bacteriological examination of the milk supply has been carried out during the year. The results of the prescribed tests for Designated Milk were exceedingly satisfactory and this reflects very creditably on the dairies concerned. Two prosecutions were, however, instituted against producers in the County for supplying milk to dairies in the Borough containing extraneous water. One increasingly disturbing feature in the milk trade is the number of empty bottles which are returned to dairies in a dirty condition after use. The main offenders appear to be employees at heavy industrial works and new building sites. It is quite easy to understand the dairy companies' sense of injustice when a legal responsibility rests upon them to ensure that all milk is sent out from their dairies in clean bottles, while at the same time there is no corresponding legislation for the consumer who misuses milk bottles. It is impossible to clean many of these misused bottles by the ordinary automatic machine washing methods, and some cannot even be cleaned by special hand treatment after soaking and finally have to be destroyed. It seems wrong to me that, while the dairy companies are legally liable for sending out a bottle from which the washing plant has failed to remove all evidence of the adhering stain of previous gross misuse by a customer, no corresponding action can be taken against the customer who is in actual fact the real offender. In the interests of public health generally it should be made an offence for a person to misuse a milk bottle, and I hope that legislation to this effect will be introduced at a not too far distant date.

### Bacteriological Examination of Milk.

The following are the details of the tests which have been carried out during the year.

Designation of Milk.	Number of Samples taken and Results.						
	Phosphatase.		Methylene Blue.			Turbidity.	
	Passed.	Failed.	Passed.	Failed.	Not carried out owing to shade temperature exceeding 65° F.	Passed.	Failed.
Pasteurised ...	69	1	63	1	6	—	—
Tuberculin Tested (Pasteurised) ...	43	—	38	—	5	—	—
Sterilised ...	—	—	—	—	—	10	—
Tuberculin Tested...	—	—	17	—	—	—	—

### Tubercle Bacilli Biological Tests.

Fourteen samples of milk were submitted to the laboratory for examination for the presence of tubercle bacilli and all were found to be tubercle free.

### THE MILK AND DAIRIES REGULATIONS, 1949-1954.

### THE MILK (SPECIAL DESIGNATION) (RAW MILK) REGULATIONS, 1949-1954.

### THE MILK (SPECIAL DESIGNATION) (PASTEURISED AND STERILISED MILK) REGULATIONS, 1949-1953.

Summary of Registrations and Licences issued under the above Regulations.

### Milk and Dairies Regulations, 1949-1954.

Number of distributors on register year ending 1955 ... ... 50

Number of dairy premises on register year ending 1955 ... ... 8

### Milk (Special Designation) (Raw Milk) Regulations, 1949-1954.

T.T. Milk—Dealers Licences Issued ... ... ... ... 42

Dealers (Supplementary) Licences Issued ... ... ... 5

### Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations 1949-1953.

Pasteurised Milk—Dealers (Pasteurisers) Licences Issued ... ... 3

Dealers Licences Issued ... ... ... ... 110

Dealers (Supplementary) Licences Issued ... ... 5

Sterilised Milk—Dealers Licences Issued ... ... ... ... 25

Dealers (Supplementary) Licences Issued ... ... 2

## ICE CREAM.

The number of premises registered for the manufacture, storage and sale of Ice Cream under section 14 of the Food and Drugs Act, 1938, is as follows :—

Seven of the above manufacturers use a pasteurised mix and five use a complete cold mix.

## **PUBLIC HOUSES.**

In previous reports I have been able to record considerable progress in improving the standard of hygiene in these premises, particularly with reference to washing facilities for cleansing and sterilising drinking glasses. As a matter of fact, during the past three years on this point of hygiene alone, 54 Public Houses in the Borough have been provided with complete facilities for cleansing drinking glasses through the efforts of this Department. It is, therefore, with very great disappointment that I now have to say that owing to the shortage of staff our progress in this direction has, similarly to the inspection of food premises, been brought to a standstill.

## REPORT OF THE BOROUGH ANALYST.

The following is a summary of the Report of the Borough Analyst, Mr. R. W. Sutton, B.Sc., F.R.I.C., for the year 1955.

## **Food and Drugs Act, 1938.**

1. During the year 1955, 237 samples were submitted under the above Act, consisting of 17 Formal samples and 220 Informal samples. This represents sampling at the rate of 1.7 per 1,000 population.
2. Of the samples submitted, 48 were classed as adulterated or below standard, or as failing to comply with the Food Standards (Labelling of Food) Order or the Public Health (Preservatives, etc., in Food) Regulations.
3. The various articles are listed in Table 1, which also includes a statement of the number reported against.

TABLE 1.

Article.	Formal.	In-formal.	Total.	Adulterated or not up to standard.	% Adulterated.
Almonds, Ground ..	..	4	4		
Baking Powder ..	..	1	1		
Barley, Pearl ..	..	1	1		
Bicarbonate of Soda ..	..	3	3		
Blane Mange Powder ..	..	1	1		
Canned Foods: Fruits ..	..	5	5		
Soup ..	..	1	1		
Vegetables ..	..	8	8		
Tomato Juice ..	..	1	1		
Cake & Pudding Mixtures ..	..	4	4		
Castor Oil .. ..	..	1	1		
Cheese, Processed ..	..	2	2		
Cheese & Tomato Spread ..	..	1	1		
Coffee & Chicory Extract ..	..	3	3		
Cooking Fat .. ..	..	2	2		
Cream .. ..	..	1	1		
Cream, Canned & Sterilised ..	..	4	4		
Curry Powder .. ..	..	1	1		
Custard Powder .. ..	..	1	1		
Dripping .. ..	..	1	1		
Epsom Salts .. ..	..	1	1		
Essences .. ..	..	2	2		
Fish Paste .. ..	..	2	2		
Flour, Self-Raising .. ..	..	5	5		
Fruit, Crystallised .. ..	..	1	1		
Fruit Curd .. ..	..	13	13		
Fruit Juice: Lemon .. ..	..	1	1		
Orange .. ..	..	1	1		
Pineapple .. ..	..	1	1		
Jelly Tablets .. ..	..	8	8		
Lard .. ..	..	4	4		
Lemonade Crystals .. ..	..	1	1		
Marzipan .. ..	..	1	1		
Milk .. .. ..	..	12	50	62	17
Milk, Condensed :					27.4
Full Cream, Sweetened ..	..	1	1		
Full Cream, Unsweetened ..	..	2	2		
Skimmed .. ..	..	4	4		
Milk, Dried: Full Cream .. ..	..	1	1		
Mincemeat .. ..	..	4	4	1	
Mint Sauce .. ..	..	1	1		
Olive Oil .. ..	..	2	2		
Pepper .. ..	..	4	4		
Peppermint .. ..	..	1	1	1	
Parsley & Thyme Stuffing ..	..	1	1		
Pickles .. ..	..	1	1		
Protein Tablets .. ..	..	2	2	2	
Rice .. ..	..	1	1		
Rice, Ground .. ..	..	1	1		
Sage & Onion Stuffing .. ..	..	1	1		
Sago .. .. ..	..	1	1		
Salad Cream & Mayonnaise ..	..	1	1		
Sauces: General .. ..	..	3	3		
Tomato .. ..	..	5	5		
Sausages: Beef .. ..	..	5	5	4	
Pork .. ..	..	27	27	19	

Article.	Formal.	In-formal.	Total.	Adulterated or not up to standard.	% Adulterated.
Semolina .. .. .. ..		1	1		
Silver Dragees .. .. .. ..		1	1		
Soft Drinks : Squashes .. .. .. ..		2	2		
Soft Drink Powders .. .. .. ..		4	4		
Soup Powder .. .. .. ..		1	1		
Spices : Cinnamon, Ground .. .. .. ..		1	1		
Sugar .. .. .. ..		1	1		
Sugar Strands .. .. .. ..		1	1		
Sweets .. .. .. ..	2	3	5	3	
Synthetic Cream Powder .. .. .. ..		1	1		
Vinegar, Malt .. .. .. ..		1	1		
 TOTALS .. .. .. ..	17	220	237	48	20.3

#### 4. Milk Samples.

Of the 62 Milk samples examined, 17 (27.4 per cent.) were classed as adulterated or below standard. Twelve samples (19.4 per cent.) contained added water (one of these being also deficient in fat) and five samples were deficient in fat only. Further particulars are included in Table 2.

TABLE 2.

Serial No.	Formal or Informal.	Nature of Adulteration.	Observations.
2141	Informal	31 per cent. Fat deficient.	Further samples genuine.
2173	Informal	3 per cent. Fat deficient.	
2176	Informal	9 per cent. added water.	
2224	Formal	Not less than 9 per cent. added water.	
2184	Informal	About 1 per cent. added water.	
2259	Informal	About 1 per cent. added water.	
2261	Informal	About 1 per cent. added water.	
2265	Informal	5 per cent. Fat deficient.	
2267	Informal	About 4 per cent. added water.	Formal Samples taken Nos. 2293—2297.

<i>Serial No.</i>	<i>Formal or Informal.</i>	<i>Nature of Adulteration.</i>	<i>Observations.</i>
2271	Informal	6 per cent. Fat deficient.	
2272	Informal	About 1 per cent. added water; 13 per cent. Fat deficient.	
2278	Informal	5 per cent. Fat deficient.	
2293	Formal	About 4% added water.	
2294	"	" 7% " "	
2295	"	" 4% " "	
2296	"	" 2% " "	
2297	"	" 4% " "	

The rate of adulteration is high, and in addition 14 samples (including one sample listed in Table 2 as fat deficient) were deficient in non-fatty-solids. These deficiencies were shown in the Freezing Point test to be due to natural causes and not to the addition of water.

Five "Appeal-to-Cow" samples were examined and all five were above the minimum limits fixed by the Sale of Milk Regulations, 1939.

The average composition of all Milks examined during the year was as follows :—

Non-fatty-solids	...	8.54	per cent.
Fat	...	3.41	per cent.
Total solids	...	11.95	per cent.

##### 5. Samples other than Milk.

During the year, 175 samples other than Milk were examined and 31 samples listed in Table 3 were reported against.

TABLE 3.

Serial No.	Formal or Informal.	Article.	Nature of Adulteration.	Observations.
2146	Formal	Peppermint ..	Consisted of a Peppermint Cordial, but the label indicated medicinal properties were claimed and it was subject to the provisions of the Pharmacy and Medicines Act.	Referred to the Pharmaceutical Society.
2194	Informal	Pork Sausages	Deficient in Meat.	
2195	Informal	Pork Sausages	Deficient in Meat. Preservatives declared; none found.	
2196	Informal	Pork Sausages	Deficient in Meat. Preservative declared ; none found.	
2198	Informal	Pork Sausages	Preservative declared ; none found.	
2201	Informal	Beef Sausages	Preservative declared ; none found.	
2202	Informal	Pork Sausages	Deficient in Meat.	
2203	Informal	Pork Sausages	Preservative present without declaration.	
2204	Informal	Pork Sausages	Deficient in Meat. Preservative present without declaration.	
2205	Informal	Pork Sausages	Preservative present without declaration.	
2227	Informal	Beef Sausages	Preservative present without declaration.	
2228	Informal	Pork Sausages	Deficient in Meat.	
2229	Informal	Pork Sausages	Deficient in Meat.	
2232	Informal	Pork Sausages	Deficient in Meat.	
2234	Informal	Pork Sausages	Deficient in Meat. Preservative present without declaration.	
2236	Informal	Pork Sausages	Deficient in Meat. Preservative present without declaration.	
2238	Informal	Pork Sausages	Deficient in Meat. Preservative present without declaration.	
2239	Informal	Pork Sausages	Deficient in Meat.	
2225	Formal	Protein Tablets	Unsatisfactory Label.	
2226	Formal	Protein Tablets	Unsatisfactory Label.	
2319	Informal	Butterscotch	Deficient in Butter Fat	Informal & Formal Samples from the same vendor. Representations to manufacturers. Stock withdrawn from sale.
2336	Formal	Butterscotch	Deficient in Butter Fat	
2320	Informal	Butterscotch	Deficient in Butter Fat	
				Further sample from the same vendor found to be satisfactory.

Serial No.	Formal or Informal.	Article.	Nature of Adulteration.	Observations.
2350	Informal	Marzipan .. ..	Labelling offence. Declared to contain 40% Ground Almonds, but only 35% found on analysis.	Representations to manufacturers.
2359	Informal	Pork Sausages ..	Deficient in Meat.	
2360	Informal	Pork Sausages ..	Deficient in Meat.	
2361	Informal	Beef Sausages ..	Preservative declared ; none found.	
2362	Informal	Beef Sausages ..	Deficient in Meat.	
2363	Informal	Pork Sausages ..	Deficient in Meat.	
2364	Informal	Pork Sausages ..	Deficient in Meat. Preservative present without declaration.	
2371	Informal	Mincemeat .. ..	Deficient in Soluble Solids.	Representations to manufacturers.

### Preservatives in Food Regulations.

The requirements of the Public Health (Preservatives, etc., in Food) Regulations are not well observed in the sale of sausages. Sausages may contain sulphur dioxide preservative up to a proportion of 450 parts per million, but the presence of preservative must be disclosed to the purchaser (either by label or by the display of a notice) at the time of sale. It is also an offence to declare the presence of preservative when none is present, and although an irregularity of this kind may appear to be of minor importance, the requirements of the Regulations are reasonable. A purchaser may, on occasion, wish to buy sausage containing preservative because of its improved keeping quality during an expected longer interval before cooking.

Twenty-seven samples of pork sausage and five samples of beef sausage were submitted for analysis during the year, and in thirteen instances the requirements of the Regulations were not observed. Eight samples contained preservative without declaration and five samples declared to contain preservative were free from preservative. In all samples where preservative was present the amounts found were below the statutory limit.

With the exception of the samples of sausage, other samples examined for the presence of preservative complied with the Preservatives in Food Regulations.

### **Sausages.**

The Meat Products (No. 3) Order contained minimum standards for the meat content of sausages, but it was revoked in 1953, and when the Order was revoked it was stated by the Minister that the intention was to enable manufacturers to provide at competitive prices "the widest variety of sausages". This seemed to imply that sausages of lower meat content would be acceptable assuming that there was an appropriate reduction in price. Food and Drugs Authorities were asked to give particulars, including price, of the samples purchased for analysis, so that the Minister could review the position later.

Following the revocation of the Order, therefore, samples were not reported against because of a low meat content, but as the information accumulated it became clear that there was little, if any, correlation between price and meat content, and that the disappearance of a minimum standard was disadvantageous to the consumer. I therefore thought it reasonable to give this matter some emphasis by reporting against those samples which failed to reach the standards contained in the old price control Order (viz. 50 per cent. meat content for beef sausages and 65 per cent. meat content for pork sausages) and the samples submitted during the year 1955 have been classified in this way.

Of the five samples of beef sausage only one failed to reach the 50 per cent. meat content standard, but of twenty-seven samples of pork sausage no less than sixteen failed to reach the standard (65 per cent.) formerly contained in the Meat Products Order. This seems to represent a deterioration in quality of a product which is still an important item in the national diet.

### **Other Foods.**

Other foods were generally satisfactory. Of four samples of Mincemeat one was deficient in soluble solids and two samples of Butterscotch were deficient in butter.

Fifteen samples of Canned Foods were submitted for examination. All were found to be in good condition and free from objectionable contamination with tin.

Food Standards Orders are in force for various foods, and samples of Coffee & Chicory Extract, Curry Powder, Fish Paste, Fruit Curd, Jelly Tablets, Mincemeat (except for the one sample referred to above), Salad Cream, Self Raising Flour, and Soft Drinks all complied with the requirements of the Orders.

**Labelling of Food Order.**

There was general compliance with the requirements of the Labelling of Food Order, but serious contravention of this Order in the sale of Protein Tablets, where general claims as to the presence of vitamins were made. A minor irregularity was the over-statement of the ground almond content of Marzipan.

**Miscellaneous Foods.**

Canned Whiting, in which there was some discolouration of the interior of the cans, was submitted for examination. There was no evidence of decomposition of the fish, nor of metallic contamination, and the product was classed as suitable for use as food.

**7. Fertilisers and Feeding Stuffs Act.**

Only two samples of Compound Fertiliser were submitted for analysis under the above Act during the year. In these samples, percentages of nitrogen, soluble phosphoric acid and potash had been correctly guaranteed (within the limits of variation permitted under the Fertilisers & Feeding Stuffs Regulations) but each sample contained an excess of insoluble phosphoric acid above the amount declared. These irregularities were classed as not to the prejudice of the purchaser.

*(Signed) R. W. SUTTON,*

*Borough Analyst.*

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